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CITY OF ABERDEEN.

REPORT

BY THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1950

With the Compliments of the Medical
Officer of Health

WILLOWBANK HOUSE,
WILLOWBANK ROAD,
ABERDEEN.



CITY OF ABERDEEN.

REPORT

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ABERDEEN:
PRINTED BY G. CORNWALL & SONS.

MCMLII.

CITY OF ABERDEEN

SUMMARY OF STATISTICS.

The following is a summary of the principal statistics for the years 1945-1950:—

	1945.	1946.	1947.	1948.	1949.	1950.
Population estimated to middle of year	*163,108	*176,939	187,751	188,853	189,314	187,961
Marriage-rate per 1,000 population .	12·5	11·9	11·1	11·1	9·7	9·9
Birth-rate per 1,000 population . .	15·5	20·4	22·0	19·1	17·5	17·2
Illegitimate birth-rate per 100 births .	10·0	7·0	5·9	5·9	5·7	5·3
Infant mortality rate	54	42	64	34	30	29
Neo-natal mortality rate	27	24	26	20	16	17
Death-rate per 1,000 population . .	12·8	12·0	11·9	11·1	11·7	12·1
Malignant diseases death-rate per 1,000 population	1·77	1·75	1·77	1·69	1·82	2·08
All tuberculosis death-rate per 1,000 population	0·52	0·47	0·41	0·37	0·35	0·23
Respiratory tuberculosis death-rate per 1,000 population	0·43	0·40	0·35	0·33	0·32	0·20
Principal epidemic diseases death-rate per 1,000 population	0·16	0·07	0·07	0·05	0·06	0·09
Average age at death (years) . .	59·6	60·3	57·3	61·7	64·1	64·9

* Mean civilian population for year.

PREFACE.

This report deals with the development of the activities of the Health and Welfare Department of the Corporation of Aberdeen during the year 1950. Details relating to housing, factories, and offensive trades will appear in the Annual Report of the Chief Sanitary Inspector.

The Registrar-General estimated the population of the City as at the middle of 1950 to be 187,961, as compared with 189,314 in 1949. The estimated populations for the years from 1945 onwards are of interest and appear in the Summary of Statistics. POPULATION.

The birth-rate per 1,000 of population was 17·2 in 1950; in 1949 it was 17·5. The lowest City birth-rate on record was that of 1945, the rate then being 15·5. The birth-rates for all Scotland were 17·9 in 1950; 18·5 in 1949; and 19·4 in 1948. In contrast, immediately after the First World War, the birth-rate in 1920 was 28·1 for all Scotland, while the City's rate was 30·3. BIRTH-RATE.

There was a rise in the general death-rate in 1950 when it was 12·1 per 1,000 of population, as compared with 11·7 in 1949 and 11·1 in 1948. The general death-rate for all Scotland for the same three years was 12·4 in 1950, 12·3 in 1949, and 11·8 in 1948. GENERAL
DEATH-RATE.

The average age at death was 64·9 years, as compared with 64·1 years in 1949, and 61·7 years in 1948.

The death-rate from respiratory tuberculosis per 1,000 of population was 0·20, and for other forms of tuberculosis 0·03. The corresponding death-rates in 1949 were 0·32 and 0·03, respectively. As regards Scotland as a whole, the death-rate from respiratory tuberculosis in 1950 was 0·47, while the death-rate from other forms of tuberculosis was 0·07. TUBERCULOSIS
DEATH-RATE.

As indicated in previous years, Aberdeen is in a notable position as regards the death-rate from tuberculosis. For several years the death-rate has been lower than in the other three cities in Scotland, and in many quarters it is held that this enviable position is in part due to the fact that, in the North-Eastern Region, there is an adequate number of hospital beds for cases of tuberculosis. The two main institutions where these beds are provided are Woodend Hospital and the City (Fever) Hospital, Aberdeen, but, in the surrounding area, there are ancillary institutions such as the hospitals at Strichen, Inverurie, Aboyne, Stonehaven, and Stracathro. In addition to these hospitals which are under the aegis of the North-Eastern Regional Hospital Board, there are two very valuable institutions which are controlled by the British Red Cross Society, namely, Glen o' Dee Sanatorium, Banchory, for service and ex-service men, and Tor-na-Dee Sanatorium, Milltimber, for doctors, nurses, medical students, and service and ex-service officers. In most

areas it has been found that, where institutions are set aside solely for the accommodation of tuberculous cases, there is great difficulty in the recruitment of nurses, but, in the North-Eastern area, this problem is not at present acute. Again, it must be remembered that the low mortality rate and low incidence rate of tuberculosis is in no small measure due to the far-sighted policy adopted by the Corporation in allocating annually the occupancy of new Council houses to families in which there is a member suffering from "open" or infectious tuberculosis. This plan enables the intelligent tuberculous patient to put into practice the preventive measures which have been inculcated in the tuberculosis institution. Although every possible consideration is given to an applicant for a Council house where one of the family is suffering from infectious tuberculosis, yet a balanced view ought to be taken so that others suffering from equally grave and killing diseases should not be excluded from the opportunity of living hygienic lives.

The extreme dread of tuberculosis which was prevalent forty years ago seems to have returned, but one must remember that, with the possible exception of the West of Scotland, the incidence of and mortality from this disease is decreasing.

INFANT MORTALITY.

The infant mortality rate indicates the number of deaths of children under one year per thousand live registered births. In 1950, this rate was 29, the lowest yet recorded in the City of Aberdeen and in any of the four cities. In the Summary of Statistics there appear the infant mortality rates from 1945 onwards. In 1950, the rate for the whole of Scotland was 39.

In 1950, the neo-natal death-rate, *i.e.*, the number of deaths of infants during the first month of life per thousand live births, was 17, as compared with 23 for all Scotland. In 1949, the neo-natal death-rate was 16 for Aberdeen and 23 for all Scotland.

The maternal mortality rate was 0.3 as compared with 1.1 for all Scotland.

INFECTIOUS DISEASES.

The incidence of ordinary infectious diseases was low during the year. The only unfortunate outbreak was that of poliomyelitis, details of which appear in the body of the report. The number of confirmed cases was 36, and of these, 2 died. The last epidemic of this disease in Aberdeen occurred in 1947 when there were 48 confirmed cases with 6 deaths.

The death-rate from infectious disease was 0.09 per thousand of population, as compared with 0.06 in 1949, the increase in the death-rate being largely due to deaths from influenza.

As regards diphtheria, the excellent record which was established in 1946, when there was not a single death from diphtheria in Aberdeen, was maintained in the three subsequent years 1947, 1948, and 1949. Unfortunately, the record was broken in 1950 by the occurrence of one death in a child aged one year: this child had not been immunised against the disease. It has never been claimed that diphtheria immunisation is an absolute preventive, but what can be guaranteed is that, if a person is fully immunised against diphtheria and is attacked by the disease, the illness will be mild in character and disturbing sequelae will be absent.

Acknowledgment must again be made of the excellent intensive immunisation work which is being conducted both amongst pre-school and school children by the Corporation's medical officers and by general practitioners in the City. In the decennium 1940-1949, the average annual number of deaths from diphtheria was 7.

In 1950, 449 cases of whooping cough were notified. This disease became compulsorily notifiable on 1st January, 1950. Prior to that date, information as to its incidence was not complete, inasmuch as it was obtained from attendance officers, teachers, and sometimes from general practitioners. Neither in 1949 nor in 1950 was there any death from whooping cough. It cannot yet be claimed that the excellent results which have been obtained in connection with the immunisation against diphtheria can yet be secured by immunisation against whooping cough. At the same time, whooping cough is a very grave disease in young children, and it is advised that mothers should take advantage of the protective facilities offered by the general practitioners and at the several Child Welfare Clinics in the City.

From the statistics presented in this report, it is evident that the health of the City of Aberdeen is being maintained.

The School Health Service is dealt with in a special section of this report. As the school year ends on 31st July, the statistics under this heading do not cover the same period as the remainder of the report.

SCHOOL
HEALTH
SERVICE.

In my report for the year 1948, a detailed description was given of the various Proposals for the Discharge of Functions relating to the duties of Local Health Authorities under the National Health Service (Scotland) Act, 1947. The matters dealt with comprise the Care of Mothers and Young Children; Midwifery; Health Visiting; Home Nursing; Vaccination and Immunisation; Prevention of Illness, Care and After-care (relating chiefly to tuberculosis); Domestic Help Service and Mental Health Services.

NATIONAL
HEALTH
SERVICE ACT.

In regard to the **Care of Mothers and Young Children**, the child welfare clinic services were extended in 1949 so that four of the Centres were kept open during the day, a health visitor being in attendance in each. This led to the inauguration of the appointment system which has now been in operation for a full year and which has proved to be of such advantage both to the mothers and also to the medical staff that it is proposed to extend the system gradually to all Clinic Centres. At these Clinics a weekly session is devoted to health education when instruction is given to the expectant mother, to the mother of the young baby, and to the mother of the growing child. Health education has proved most successful, and the formal instruction at these Clinics has given place to informal discussions on all manner of health topics.

The Medical Officer for Maternity and Child Welfare and her medical staff continue to hold honorary appointments in the Royal Aberdeen Hospital for Sick Children.

During the year under review, a Day Nursery capable of accommodating 44 children was acquired at No. 2A, View Terrace. Certain adaptations were required, and these were completed on 1st May. This Nursery was provided in substitution

for the Nursery at Castle Terrace. At the latter Nursery there were only 30 places, so that an appreciable increase in accommodation was available when the transfer took place to View Terrace. The environment at the new Nursery at View Terrace is much superior to that which existed at Castle Terrace. At the new Nursery there is a large stretch of grass in front of the building, and behind there is an extensive garden in which are provided all forms of recreational facilities.

On 30th May, a much-needed Residential Nursery was opened at Pitfodels and took the place of the Residential Nursery which had been temporarily conducted at Westfield Terrace. The accommodation available at Westfield Terrace was 18 places, whereas at Pitfodels the number is 50. Pitfodels has a further great advantage of having spacious grounds which permit of necessary extension being carried out as the demand for admission is much greater than the accommodation now available.

In 1950, the number of **Midwives** was 11, 8 of whom were employed by the Corporation and 3 by the Board of Management for the Aberdeen Special Hospitals. The present trend continues to be towards institutional confinement and the number of domiciliary confinements is steadily diminishing, so much so that the pupil midwives will have difficulty in receiving a sufficiency of cases within the City of Aberdeen.

At the end of 1950, the Corporation had in their employment 42 **Health Visitors** under the executive control of a Superintending Nursing Officer and her assistant. Aberdeen is more favourably placed than most other areas so far as the recruitment of health visitors is concerned and this is largely due to the fact that a Training School was inaugurated under the auspices of the Corporation in March, 1948. Since the School was opened, four groups of approximately 21 students each have been trained in Aberdeen and all have successfully passed the examination for the Health Visitor's Certificate. The reason for establishing the School for Health Visitors was primarily in order to train qualified nurses to undertake the additional preventive duties which would be placed on local health authorities under the National Health Act. Unfortunately, the functions and duties of health visitors are not fully understood or appreciated. It must be realised that, in dealing with the individuals in the community, the curative and preventive aspects must go forward side by side.

The **Home Nursing Service** is provided by the Aberdeen and District Nursing Association who undertake the domiciliary nursing service on behalf of the Corporation and whose financial commitments are met by the Corporation. This arrangement is intended to persist for a preliminary period of three years. The Corporation are insistent that the District Nursing Association should provide a night nursing service for the sick of Aberdeen.

Vaccination against Smallpox and Immunisation against Diphtheria are carried out by general practitioners and by the Corporation's medical staff at special sessions held at the Child Welfare Clinics. The general practitioners do not receive payment for administering the prophylactic, but they do receive payment for

record cards of vaccination and immunisation submitted to the Medical Officer of Health, the payment being made in accordance with the scale approved by the Secretary of State. The prophylactic material is supplied to the practitioners free of charge.

Another function placed on the local authority is the **Prevention of Illness, Care and After-care**. This relates chiefly to tuberculosis, mental illness, venereal disease, and malignant disease. The Corporation continue to be responsible for the prevention of the spread of tuberculosis in the home, but they are now no longer responsible for the hospital treatment of tuberculosis, which function now devolves on Regional Hospital Boards.

Special allowances are still made to certain cases suffering from respiratory tuberculosis, the essential for the granting of an allowance being that the recipient is likely to be able again to engage in remunerative employment within a reasonable period of time. In the past, these allowances were paid by local authorities, but they are now made direct by the National Assistance Board.

Certain cases suffering from tuberculosis receive milk at the expense of the local authority. Where necessary, beds and bedding are provided on loan by the local authority.

A permissive duty devolving on local authorities is the provision of **Domestic Helps** and most local authorities in Scotland, recognising the value of domestic helps, have introduced a service of domestic helps. The Corporation have now 46 full-time and 24 part-time domestic helps, and, during the year, permission was given to increase the number to 80.

These domestic helps are sent to homes where illness exists or where a mother is being confined at home or has returned from hospital after confinement. In maternity cases, the services of domestic helps have proved invaluable, *e.g.*, after a woman has been confined in hospital and returns home, it is customary to introduce into the home a domestic help for a period of, say, two weeks until the mother is completely restored to health.

It is envisaged that a dual extension of this service will take place in the near future, namely, the provision of domestic helps for old people and, in certain circumstances, for tuberculous families.

The introduction of the Health Act took from the local authority many duties that it used to have in relation to **Mental Health**. For example, the Corporation have now no responsibility for the residential accommodation of those who are mentally ill but certain duties still devolve on them, such duties being performed through the agency of whole-time Authorised Officers. These Authorised Officers have to make arrangements for the detention of persons of unsound mind who have no friends willing or able to take such action. When it is proposed to discharge insane patients from a mental hospital, the Authorised Officers have to ensure that satisfactory arrangements have been made for the welfare of the patients when they return home.

JOINT
ADVISORY
CO-ORDINATING
COMMITTEE.

With a view to close co-operation being established between certain administrative bodies, a Joint Advisory Co-ordinating Committee has been set up, comprising representatives of the North-Eastern Regional Hospital Board, of the Executive Council, and of the Health and Welfare Committee of the Corporation. As time goes on, there is no doubt that the functions and value of this Committee will steadily increase.

WELFARE
SERVICES.

On 2nd December, a number of old persons were admitted to Balnagask House, the first of the Corporation's new Homes for the reception of the aged and infirm. The House, which is situated in delightful surroundings, was formally declared open by Sir Andrew Davidson, Chief Medical Officer of the Department of Health for Scotland. It has accommodation for 22 old people, and, in addition, has two isolation rooms for any of the residents who fall ill and require special attention. In the Home, however, such sick persons can only get attention equivalent to that which they would receive if they were in their own homes. If hospital treatment of any kind is required, the responsibility then falls on the Regional Hospital Board.

ACKNOW-
LEDGMENTS.

I wish again to put on record my thanks to the Health and Welfare Committee for their assistance in health schemes submitted for their consideration during the year. I also wish to thank the members of the staff for their continued loyal co-operation.

HARRY J. RAE,

Medical Officer of Health.

HEALTH AND WELFARE DEPARTMENT,
WILLOWBANK HOUSE,
WILLOWBANK ROAD,
ABERDEEN, 4th December, 1951.

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CITY OF ABERDEEN.

REPORT BY THE MEDICAL OFFICER OF HEALTH

For the year 1950.

A.—LOCAL HEALTH AUTHORITY FUNCTIONS.

1.—CARE OF MOTHERS AND YOUNG CHILDREN.

Maternal Mortality.

In the Preliminary Return for 1950, the Registrar-General states that in Scotland 106 women died from causes peculiar to pregnancy and childbirth, as compared with 124 in 1949, and that deaths from puerperal sepsis numbered 23 in 1950, as against 24 in 1949.

In Aberdeen, in 1950, there was only one death from a cause related to pregnancy and childbirth and this death was due to post-partum hæmorrhage. This death occurred in a married woman aged 21 years.

In 1949 there were three deaths from causes peculiar to pregnancy and childbirth and one of these was due to puerperal sepsis.

As regards death-rates from diseases peculiar to pregnancy and childbirth, Aberdeen had a rate of 0·3 in 1950, as compared with a rate of 1·1 for all Scotland. In the quinquennium 1945-1949, the average rate for all Scotland was 1·9; in Aberdeen it was 1·0.

The following table gives the comparison between Aberdeen and all Scotland:—

Per 1,000 live and still births

Year	Maternal Mortality Rate		Puerperal Sepsis		Other Puerperal Conditions	
	Scotland	Aberdeen	Scotland	Aberdeen	Scotland	Aberdeen
1950	1·1	0·3	0·24	0·0	0·9	0·3
1949	1·3	0·9	0·24	0·3	1·01	0·6
1948	1·5	1·1	0·29	0·0	1·25	1·1
1947	2·0	1·2	0·3	0·24	1·7	0·95
1946	2·2	0·5	0·5	0·25	1·7	0·25
1945	2·8	1·4	0·9	0·7	1·9	0·7
Average 1945-1949	1·9	1·0	0·4	0·3	1·5	0·7

Puerperal Fever and Puerperal Pyrexia.

In the following table are shown particulars relating to the number of cases notified during the year as suffering from puerperal fever and puerperal pyrexia:—

	Puerperal Fever	Puerperal Pyrexia
No. of cases notified	35	11
No. of deaths	—	—
No. receiving Institutional Treatment in—		
City (Fever) Hospital	35	11
Other Institutions	—	—
No. retained at home	—	—
No. of cases following abortion	27	—
No. of deaths following abortion	—	—

Infant Mortality.

During 1950 there were 92 deaths among children under one year of age, as compared with an average of 159 deaths during the 1945-1949 quinquennium. The infant mortality rate, expressed as deaths per 1,000 live births, was 29 during 1950, as compared with 45 in the preceding quinquennium. *This rate of 29 is the lowest yet recorded.*

Comparison with other Cities.—The infant mortality rate throughout Scotland was 39—the lowest mortality rate yet recorded. Among the four principal cities in Scotland, Aberdeen and Edinburgh were lowest, each with a rate of 29.

The infant mortality rates for all Scotland and for the four principal cities are given below:—

	Year 1950.	Year 1949.
All Scotland	39	41
Glasgow	44	49
Edinburgh	29	32
Dundee	50	44
Aberdeen	29	30

The accompanying chart shows the infant mortality rate in Aberdeen, as compared with the other three cities and with all Scotland since 1856.

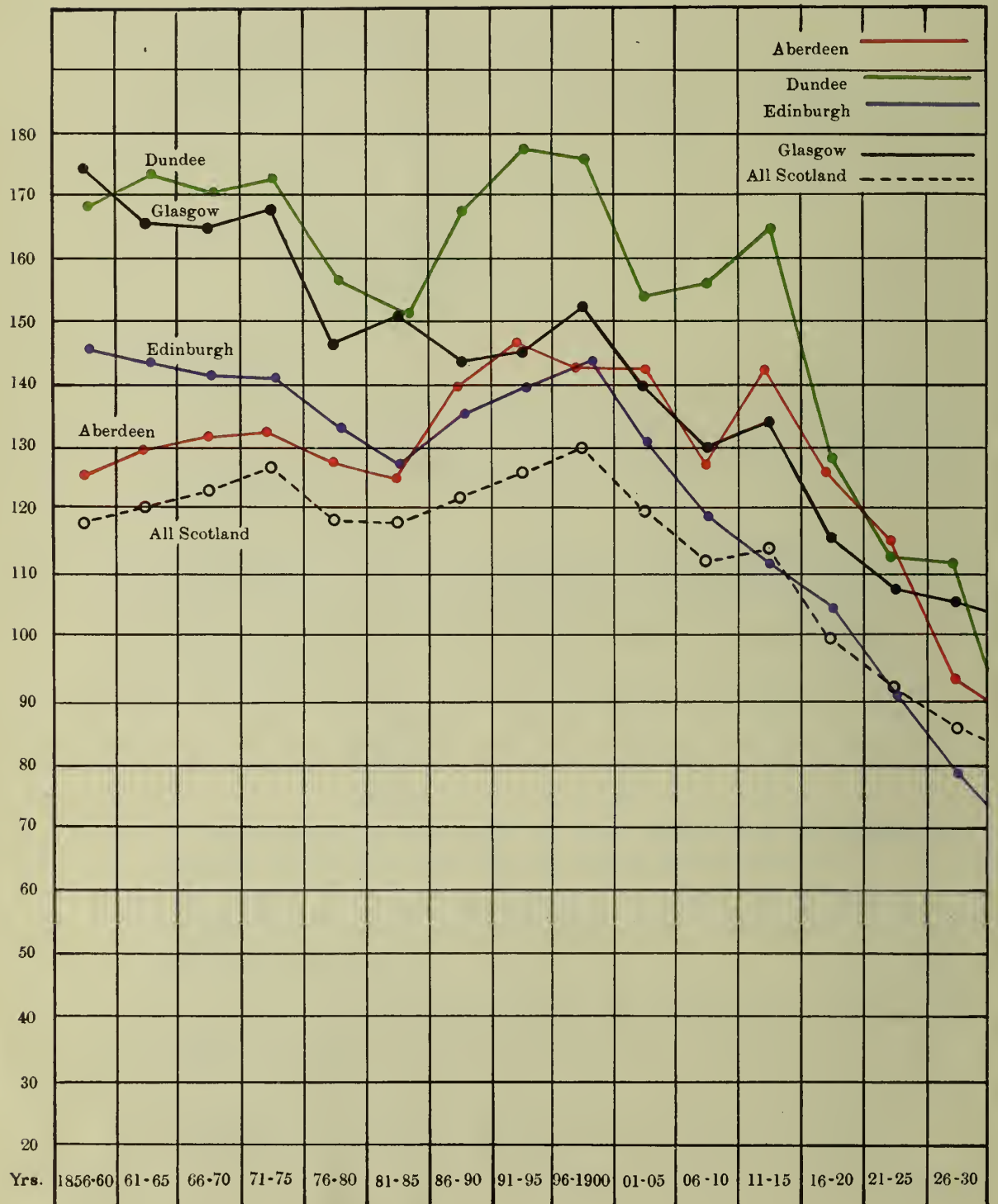
Distribution of Infant Deaths according to Wards of City.—The infant mortality rate in the various wards of the City is shown in Table I at the end of this section of the Report.

Causes of Death.—Table II gives the actual number of deaths of children at various age-periods. In Table III, death-rates are substituted for the actual number of deaths.

The following analysis, based on the recent international classification of causes of death, gives the death-rates from various causes during last three years:—

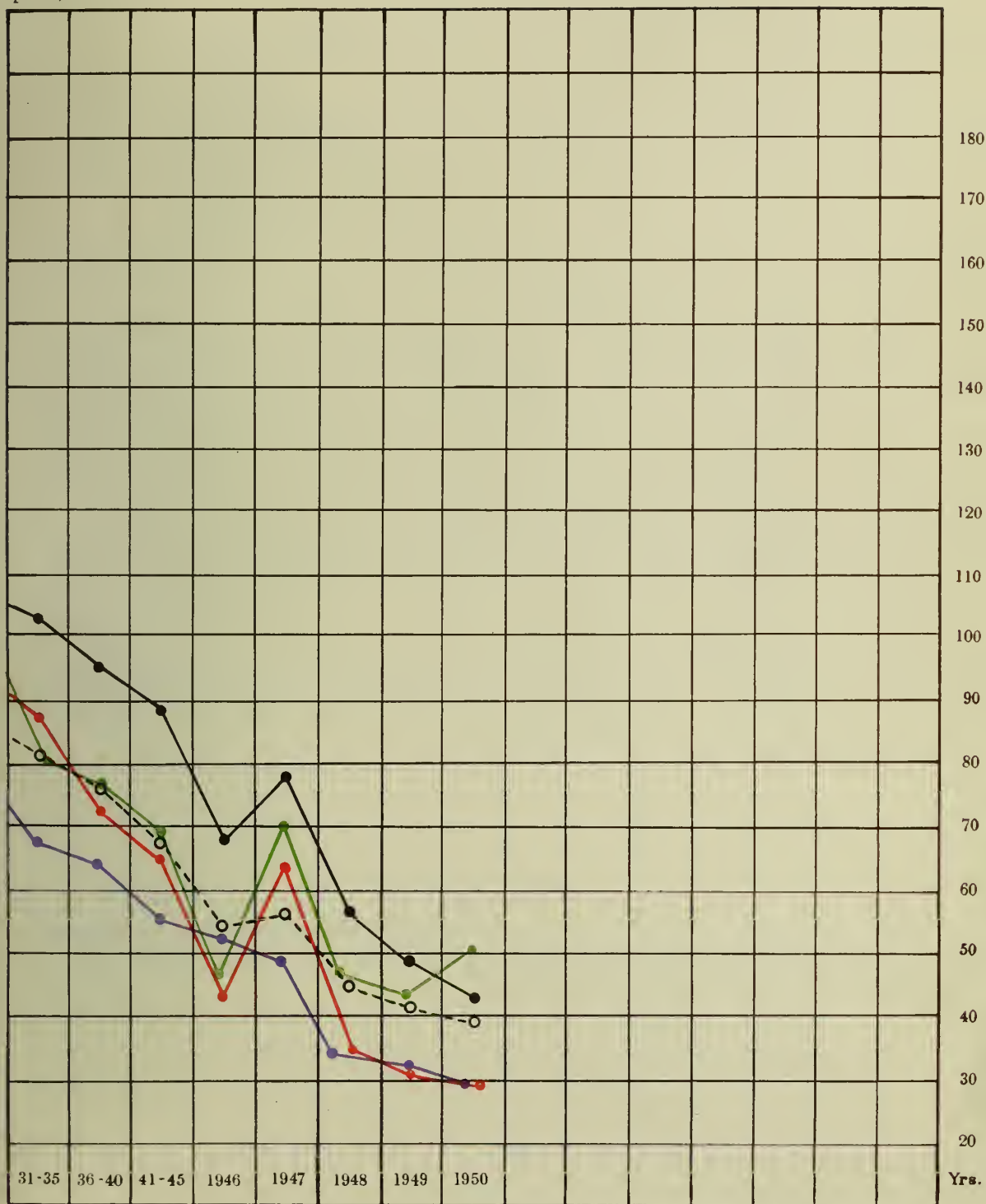
INFANT MORTALITY RATE, 1856-1950 -

Deaths under 1 year



-QUINQUENNIAL AVERAGES. 1856-1945.

per 1,000 Births.



	Death Rates per 1,000 Live Births.		
	1950.	1949.	1948.
Congenital malformations	5	5	4
Immaturity	5	4	6
Atelectasis	4	5	5
Birth injuries	2	1	4
Diarrhoea and Enteritis	0·3	3	5
Pneumonia and bronchitis	6	7	5
Common zymotic diseases	0·3	1	1
Tuberculosis	0	0·3	0
Overlaying and other accidents . .	2	1	2
Other causes	4	3	2
	29	30	34

As will be seen from above summary, deaths from congenital malformations and diseases of early infancy accounted for more than half of the death-rate in 1950. The death-rate from diarrhoea and enteritis showed a considerable decrease as compared with the preceding two years, the rate in 1950 being 0·3, as compared with 3 deaths per 1,000 births in 1949, and 5 in 1948. The death-rate from pneumonia and bronchitis was equal to the average of the preceding two years. In 1950 one death from measles gave the death-rate of 0·3 for common zymotic diseases.

Neo-Natal Deaths.—In 1950 the number of neo-natal deaths, *i.e.*, deaths of infants under one month, was 54, as compared with 80 in the preceding quinquennium. The neo-natal death-rate in 1950 was 17 per 1,000 live births, as compared with 23 for all Scotland. The neo-natal death-rate for Aberdeen is referred to in Table III.

Still-Birth Rate.—In 1950 there were 74 still-births. This constitutes a still birth rate of 22 per 1,000 live and still-births. Corresponding data for Scotland and for the other cities for the years 1950 and 1949 are as follows:—

	Still-Birth Rate.	
	1950.	1949.
All Scotland	27	27
Glasgow	29	30
Edinburgh	24	24
Dundee	31	28
Aberdeen	22	19

Aberdeen had the lowest still-birth rate in 1950.

Mortality in Pre-School Period (1-5 years).

The number of deaths in 1950 and in the previous quinquennium was as follows:—

	1950.	Average	
		1945-1949.	
1 and under 2 years	5	...	11
2 " 3 " 	8	...	5
3 " 4 " 	3	...	4
4 " 5 " 	3	...	3
	—		—
	19	...	23
	==		==

In 1950, of the 19 deaths in the 1-5 age-period, 9 were due to accidents, including 6 from motor vehicle accidents: the average number of deaths from accidents in the 1945-49 quinquennium was 5. In 1950 there was 1 death from diphtheria: the child had not been immunised against diphtheria. In the preceding quinquennium, one death from diphtheria occurred in 1945, but from 1946 to 1949 there were no fatal cases. There was also in this age-period one death from tuberculous meningitis, as compared with two in the preceding quinquennium.

Ante-Natal and Post-Natal Clinics.

Ante-natal Clinics are held at three Welfare Centres in the City—Castle Terrace, Hilton, and Torry. Medical supervision is provided for women for whom institutional confinement has been arranged. Midwives advise all women who expect to be confined at home, and who have not placed themselves under the care of general practitioners, to attend these clinics.

In addition to the specialist clinics conducted at the Aberdeen Maternity Hospital, Post-natal Clinics have been instituted at the Castle Terrace, Hilton, and Torry Centres.

The number of women who attended the clinics during the year was 3,039 at Ante-natal and 1,410 at the Post-natal Clinics.

There were 20,332 attendances at Ante-natal Clinic and 1,446 at Post-natal Clinics.

Child Welfare Centres.

There are four Child Welfare Centres—Castlegate, Charlotte Street, Hilton, and Torry. These are open daily from 9 a.m. to 5 p.m. with health visitors in attendance. To these centres mothers may come at any time for advice. Sessions are held for vaccination against smallpox, for immunisation against diphtheria and whooping cough, and for baby weighing. Special morning sessions are reserved for giving advice to mothers as to infant feeding. Medical examinations are carried out for the most part by appointment.

Ultra-violet light Clinics are held at Hilton and Charlotte Street Centres, and to these clinics are brought debilitated children for artificial sunlight treatment.

Weekly clinics are held at five other centres, viz.:—Old Aberdeen, Powis, Holburn Street, Gallowgate, and Beechgrove. Unfortunately, the Corporation's let of the premises used for the Holburn Clinic was terminated at the end of the year, and although strenuous efforts were made to obtain alternative accommodation, no such accommodation could be found, and, accordingly, this area is now without a clinic. As an alternative arrangement, a special clinic is conducted at the Castlegate Centre. At Hayton, a twice-weekly clinic is conducted and at Ruthrieston a clinic is held on alternate weeks.

The extent of the work performed at the centres during 1950 is summarised hereunder:—

- (i) Number of Clinics provided by the Corporation as at end of year—11.
- (ii) Total number of children under 5 years of age who first attended at the clinics during the year—
 - (a) Under 1 year of age—1,762.
 - (b) Over 1 year of age—352.
- (iii) Total number of attendances made by children during the year—
 - (a) Under 1 year of age—21,624.
 - (b) Over 1 year of age—7,153.

Dental Care.

The importance of the dental care of expectant and nursing mothers and of pre-school children cannot be over-estimated. The following figures are interesting, but it must be stated that the dental attention to these members of the community is totally inadequate:—

	Mothers.	Pre-School Children.
(i) Number inspected by Dental Officers	30	995
(ii) Number requiring treatment	30	936
(iii) Number accepting treatment :	29	763
(iv) Number actually treated by Dental Officers . .	29	763

Expectant and nursing mothers and pre-school children are referred by medical officers attached to the Maternity and Child Welfare Department to the School Dental Clinic, North Silver Street, Aberdeen. The Chief Dental Officer sends for the patients with as little delay as possible and it is usual that the delay is only a matter of a few days. As the number of dental officers employed by the Corporation was in this year reduced to two, only a limited amount of time could be allocated to this work.

Mother and Baby Home.

The Mother and Baby Home in the City is conducted by a voluntary association at Richmondhill House, King's Gate. There is accommodation for 10 expectant mothers and 10 post-natal cases. There are also 12 cots. During the year under review 63 women were admitted to this Home.

Salvation Army.

Arrangements have been made whereby certain expectant unmarried mothers are sent by the Corporation to the Salvation Army Homes in Dundee and Glasgow. The women are admitted six weeks before the expected date of confinement and are retained in these Homes for a period of four months subsequent to confinement.

Day Nurseries.

There are four Day Nurseries provided by the Corporation and they have been approved for training purposes. Details as to site, accommodation, and attendances are as follows:—

Name of Nursery	Number of approved places		Number of Children on register at end of year	Average daily attendances during year	Waiting Lists at end of year
	0—2 years	2—5 years			
Charlotte Street Nursery	30	30	42	47	99
Castle Terrace Nursery - 1/1/50-4/5/50	10	20	—	24	—
View Terrace Nursery—5/5/50-31/12/50	20	24	27	28	81
Torry Nursery	15	25	35	31	35
Linksfeld Nursery	10	20	27	26	34

Castle Terrace ceased to be used as a Day Nursery as from 4th May, 1950, its place then being taken by View Terrace Day Nursery.

Residential Nurseries.

Residential accommodation is provided in Thorngrove Home, Great Western Road. Provision was also made at the Nursery at 25, Westfield Terrace, which was closed on 23rd May, 1950, the children being transferred to Pitfodels Residential Nursery which was opened on the same date. Thorngrove Home has 21 places for children under the age of 1 year; the Residential Nursery in Westfield Terrace accommodated 18 children from 2 to 5 years; and Pitfodels Nursery has accommodation for 50 children.

Care of Premature Babies.

The Babies' Nursery in the Maternity Hospital was opened in 1940, and, since that date, has performed a most useful function. It has given feeble, premature infants the best chance of survival. In the nursery there are 30 cots for infants born before the normal date of gestation or born in difficult conditions in the wards of the hospital.

Births.

The registered births are detailed in the Statistical Commentary of this Report. The particulars regarding the births occurring in the City during 1950 are given in Section A II which deals with Midwifery.

The tables relating to births, still-births, and infant mortality are herewith submitted:—

YEAR	Whole City.	Ward of City.												
		Wood- side.	St. Machar.	St. Clement's	Grey- friars.	St. Nicholas.	Gilcom- ston.	Rose- mount.	Rubis- law.	Ruthrie- ston.	Hol- burn.	Ferry- hill.	Torry.	
1950 . Average 1945-49	Infant Mortality Rate	29	36	24	46	32	6	20	17	18	24	15	45	45
	do.	45	44	52	54	55	46	49	30	35	24	42	38	48
1950 . Average 1945-49	Number of Births	3226	658	510	131	315	185	150	120	280	124	259	157	337
	do.	3522	607	585	328	329	149	181	178	154	263	165	189	394
1950 . Average 1945-49	Number of Deaths under 1 year.	92	24 (1)	12	6	10 (1)	1	3	2	5 (2)	3	4	7	15
	do.	159 (20)	26 (2)	30 (3)	18 (4)	18 (3)	7 (1)	10 (1)	5 (0.4)	6 (1)	6 (1)	7 (1)	7 (0.4)	19 (3)
1950 . Average 1945-49	Causes of Death— Infectious Diseases	1	—	—	—	—	—	—	—	—	—	—	—	1
	do.	4 (1)	1 (0.4)	1	0.2 (0.2)	0.4 (0.2)	0.2 (0.2)	0.2	0.2	—	0.2 (0.2)	0.2	0.4	0.4 (0.2)
1950 . Average 1945-49	Tuberculosis	0	—	—	—	—	—	—	—	—	—	—	—	—
	do.	1	0.4	0.2	0.2	—	—	—	—	—	—	—	0.2	—
1950 . Average 1945-49	Diseases of Early Infancy	59 (4)	15 (1)	6	3	6 (1)	1*	2	2	5 (2)	2	4	6	7
	do.	78 (7)	13 (1)	14 (1)	7 (1)	8 (1)	2 (0.2)	5 (0.6)	3 (0.2)	4 (0.4)	4 (0.2)	3 (0.2)	3	12 (1)
1950 . Average 1945-49	Pneumonia, Bron- chitis, etc.	19	5	3	2	2	—	1	—	—	—	—	1	5
	do.	28 (3)	5	5 (0.6)	3 (0.6)	4 (0.6)	2 (0.2)	2	0.6	0.6 (0.2)	1 (0.2)	1	1	3 (0.6)
1950 . Average 1945-49	Diarrhoea and Enteritis	1	—	—	—	—	—	—	—	—	—	—	—	1
	do.	36 (7)	5 (0.6)	8 (1)	6 (2)	5 (1)	2 (1.6)	2 (0.4)	1 (0.2)	0.2 (0.2)	1 (0.2)	2 (0.2)	1	3 (0.4)
1950 . Average 1945-49	Other Causes	12	4	3	1	2	—	—	—	—	1	—	—	1
	do.	11 (2)	2 (0.2)	2 (0.4)	1	1	0.6 (0.2)	0.6	0.2	0.6 (0.2)	0.2	0.6 (0.2)	1 (0.2)	1 (0.4)

1950. —Of above 92 deaths, 4 — 4 per cent.—occurred among illegitimate children. The numbers are denoted in brackets.

Average. 1945-49.—Of above 159 deaths, 20 — 13 per cent.—

do.

do.

do.

TABLE II.—CAUSES OF DEATH AMONG CHILDREN UNDER FIVE YEARS OF AGE.
Year 1950.

CAUSES OF DEATH	AGE																
	FIRST YEAR							SECOND TO FIFTH YEARS									
	First Four Weeks			First Three Months				The Four Quarters							Total		
	0-1	-2	-3	-4	0-1	-2	-3	0-3	-6	-9	-12	Total	-2	-3	-4	-5	Total
	0-1	-2	-3	-4	0-1	-2	-3	0-3	-6	-9	-12	Total	-2	-3	-4	-5	Total
Tuberculosis (Respiratory { Other Forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-spinal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Poliomyelitis, Acute	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Infective and Parasitic Diseases	2	...	...	...	3	4	3	10	8	...	2	3	1	1	...	...	1
Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhea and Enteritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Digestive Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Malformations	7	1	...	...	8	4	3	15	1	...	16	16	1	...	1	...	1
Injury at Birth	5	1	...	...	6	...	...	6	...	...	6	6	...	...	...	...	...
Post-natal Asphyxia and Atelectasis	14	...	...	...	14	...	...	14	...	...	14	14	...	...	...	...	...
Other Infections of Newborn	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Other Diseases of Early Infancy	2	...	...	...	2	...	...	3	...	...	...	...	...	...	...	...	...
Immaturity	16	...	...	...	16	...	...	16	...	...	16	16	...	...	...	...	...
Suffocation	...	1	...	...	2	1	2	5	...	...	5	5	...	...	...	...	...
Other Accidents	...	...	...	...	2	...	...	2	1	2	1	6	2	2	...	...	...
Other Causes	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
ALL CAUSES	48	3	1	1	54	10	10	74	11	4	3	92	5	8	3	19	159
Average for preceding 5 years, 1945-1949	62	7	4	6	80	15	15	110	32	12	5	159	11	...	4	3	23

* This column includes all deaths in preceding columns.

TABLE III.—ABERDEEN—BIRTHS, STILL-BIRTHS, INFANT MORTALITY.
YEARS 1940-1950.

YEAR.	No. of Live Births.	Live Births per 1,000 of Population.	Illegitimate Births, per cent. of Live Births.	No. of Still Births.	Still Births per 1,000 Total Births, incl. Still Births.	No. of Deaths of Infants under 1 Year.	No. of Deaths of Infants under 1 Month.	Neo-natal Deaths per cent. of Total Infant Death.	Deaths-rates from all Causes per 1,000 Live Births.				Death-rates among Infants under 1 Year of Age from Various Causes per 1,000 Live Births.										Other causes.		
									Total Year.	Under One Month (Neo-natal Rate).	Rates.		Tuberculosis.	Common Zymotic Diseases.	Pneumonia and Bronchitis.	Diarrhea and Enteritis.	Congenital Malformations.	Injury at Birth.	Atelectasis.	Immaturity.	Accidents.				
											One Month and under Six Months.	Six Months and under One Year.													
																						1950 .		1949 .	1948 .	1947 .	1946 .	1945 .	Average 1945-49	1944 .	1943 .	1942 .	1941 .	1940 .	Average 1940-44
3226	17.2	5.3	74	22	92	54	59	29	17	10	2	0	0.3	6	0.3	5	2	4	5	2	5	3	2	5	13
3306	17.5	5.7	63	19	100	54	54	30	16	12	2	0.3	1	7	3	5	1	5	4	5	2	4	1	3	
3598	19.1	5.9	98	27	121	72	60	34	20	10	4	0	1	5	5	4	4	6	4	5	2	6	2	2	
4124	22.0	5.9	107	25	263	108	41	64	26	28	10	0.2	2	13	22	4	2	8	5	2	6	2	2	6	
3762	20.4	7.0	115	30	158	92	58	42	24	16	2	0.5	0.3	6	9	5	3	7	7	1	3	1	3	3	
2830	15.5	10.0	71	24	152	76	50	54	27	21	6	0.4	2	8	11	5	6	4	11	0.4	6	1	0.4	6	
3524	18.9	6.9	91	25	159	80	51	45	23	17	5	0.3	1	8	10	5	3	6	7	1	4	1	1	4	
2989	16.5	9.2	68	22	169	83	49	57	28	23	6	0.3	1	14	7	7	5	6	8	2	7	2	2	7	
2876	16.0	8.9	96	32	195	111	57	68	39	24	5	0	2	11	11	5	7	9	11	1	11	1	1	11	
2904	16.1	8.5	91	30	194	104	54	67	36	22	9	1	3	10	11	6	3	4	21	0	8	0	8	8	
2907	16.2	7.5	96	32	224	128	57	77	44	25	8	0	2	15	9	8	5	4	18	2	14	2	14	14	
2804	15.6	6.3	115	39	241	120	50	86	43	27	16	0.4	5	22	9	6	4	8	13	0.4	18	0.4	18	18	
2896	16.1	8.1	93	31	205	109	53	71	38	24	9	0.3	3	14	9	6	5	6	14	1	13	1	1	13	

2.—MIDWIFERY (INCLUDING PROVISION OF ANALGESIA).

The Corporation's Domiciliary Midwifery Scheme under the Maternity Services (Scotland) Act, 1937, came into operation on 1st November, 1941. When the National Health Service Act was introduced, this scheme was modified by the fact that the practitioners, instead of being employed and recompensed by the Corporation, are now paid through the Executive Council.

The midwifery staff consists of a Supervisor of Midwives—who is also Superintending Nursing Officer—and eight whole-time midwives. To each municipal midwife a district of the City has been allocated. In addition, one central district is served by three midwives attached to the Aberdeen Maternity Hospital; the Corporation pay £750 per annum towards the remuneration of these midwives.

Births.

The particulars regarding the births, including still-births, which occurred in the City during 1950 are as follows:—

- (i) Total number of births occurring in the area during year—that is, before correction for mother's residence:—Live births, 3,855; still-births, 105; total, 3,960.
- (ii) Total number of births in (i) occurring in institutions (including private maternity homes), 3,394.
- (iii) Total number of births in (i) occurring at home, 566.
- (iv) Number of births in (iii) classified to show nature of attendance at birth:—

	Cases dealt with under Section 23 (2) of the National Health Service (Scotland) Act, 1947.			Other domiciliary cases			Total
	Doctor engaged and present at confinement	Doctor engaged and not present at confinement	Midwife alone (no doctor engaged)	Doctor and Midwife engaged	Midwife alone (no doctor engaged)	Without doctor or midwife	
(a) Midwives employed by the Authority (including those engaged on a fee per-case basis)	32	360	15	...	...	...	407
(b) Midwives employed by Voluntary Organisations under arrangements made by the Authority . . .	...	...	...	..	...	...	...
(c) Midwives employed by Hospital Boards of Management under arrangements made by the Authority with the Regional Hospital Board	14	124	16	...	...	...	154
(d) Private practising midwives . . . . .	...	...	...	...	...	...	...
(e) Totals.	46	484	31	*4	...	†1	566

* Doctors alone—Removed to Nursing Home after delivery.

† Concealed pregnancy.

(v) Medical Aid.

- | | | |
|--|-----------|----|
| (a) No. of cases in which medical aid was summoned during the year under Section 22 (1) of the Midwives (Scotland) Act, 1915, by a Midwife:— | | |
| (i) For Domiciliary Cases | | 0 |
| (ii) For Institutional Cases | | |
| (b) No. of cases in which medical aid was summoned during the year for cases where the medical practitioner had agreed to provide medical services under the National Health Service | | 78 |

(vi) Administration of Analgesics.

- | | |
|---|-----|
| (a) No. of midwives in practice in the area qualified to administer analgesics in accordance with the requirements of the Central Midwives' Board for Scotland:— | |
| (i) Domiciliary | 10 |
| (ii) In Institutions | 47 |
| (b) No. of domiciliary midwives who received their training during the year | 0 |
| (c) No. of sets of apparatus for the administration of gas and air in use at 31st December, 1950, by domiciliary midwives employed by the Authority, or employed by voluntary organisations in the Authority's area | 2 |
| (d) No. of sets on order at 31st December, 1950 | 0 |
| (e) No. of cases in which gas and air was administered by midwives in domiciliary practice during the year | 310 |
| (f) No. of cases in which pethidine was administered by midwives in domiciliary practice during the year | 0 |
| (vii) No. of cars in use by midwives at 31st December, 1950 | 0 |

3.—HEALTH VISITING.

Under Section 24 of the National Health Service (Scotland) Act, 1947, it is the duty of every local health authority to make provision in their area for the visiting of persons in their homes by visitors, to be called "health visitors," for the purpose of giving advice as to the care of young children, of persons suffering from illness, and of expectant or nursing mothers, and as to the measures necessary to promote health and to prevent the spread of infection.

In 1950 there were 37 health visitors in the employment of the Corporation in connection with maternity and the school health services. In addition, 4 health visitors were employed for the care and supervision of cases of tuberculosis, and one health visitor was reserved mainly for the visitation of cases suffering from infectious diseases.

In order to provide a thoroughly efficient health visiting service, the Corporation will require to consider very carefully the minimum number of health visitors required for the area. In the Corporation's Proposals for the Discharge of Functions relating to Health Visiting, it is stated that 45 would be required, but, from the experience gained since 5th July, 1948, this number is not sufficient.

In April, 1948, the Corporation inaugurated a training course for the Health Visitor's Certificate. Including the course which was commenced in October, 1950, there have so far been four courses. The lecturers in these courses were medical members of the staff of the Health and Welfare Department, Professors and Lecturers of Aberdeen University, medical personnel employed by the North-Eastern Regional Hospital Board, and several others. It is gratifying to be able to report that all the candidates who attended the four courses gained the Health Visitor's Certificate. These courses have proved most beneficial in the recruitment of health visitors to the Corporation's service. In order to supervise the theoretical and practical training of the student health visitors, the Corporation engaged a Health Visitor Sister Tutor.

Visitation by Health Visitors.

The work performed by the health visitors during the year is given hereunder:—

(a) Maternity and Child Welfare—

	First Visits.	Total Visits.
Expectant mothers	1,654	6,175
Infants	2,985	35,588
Children (1-5 years)	2,275	48,461

(b) Tuberculosis—

Cases of tuberculosis	298	6,312
---------------------------------	-----	-------

(c) Other cases, *e.g.*, School Health Service

follow-up work and infectious diseases	2,528	2,648
--	-------	-------

4.—HOME NURSING.

The number of cases attended and the number of visits paid by the nurses employed by the Aberdeen District Nursing Association which acts as Agent for the Corporation were as follows:—

(i) Number of cases attended by home nurses	3,464
(ii) Number of visits paid by nurses to these cases	80,090

5.—DOMESTIC HELP.

During the year under review, there was a great increase in the demand for the services of domestic helps, and the Corporation decided to increase the establishment from 40 to 80. At the end of the year there were 46 whole-time and 24 part-time domestic helps, and the number of cases where domestic helps were provided full-time was 394, while in 257 cases assistance was provided part-time. The average period of assistance was approximately three weeks.

6.—VACCINATION AND IMMUNISATION.

Vaccination against Smallpox.

Vaccination against smallpox ceased to be compulsory with the introduction of the National Health Service (Scotland) Act. Vaccination is now undertaken by the general practitioners and by the Corporation's Medical Officers at the Child Welfare Clinics. The following table gives the number of vaccinations reported to the Health and Welfare Department during 1950.

PRIMARY VACCINATIONS.

Year of Birth	Typical Vaccinia greatest at 7th-10th day	Accelerated (Vaccinoid) Reaction 5th-7th day	Greatest Reaction 2nd-3rd day	No Local Reaction	Total
1950	963	11	16	127	1,117
1949	1,043	2	3	54	1,102
1948	253	3	2	9	267
1947	35	...	...	...	35
1946	22	...	1	1	24
1945	21	1	1	...	23
1944	19	...	1	2	22
1943	16	1	1	1	19
1942	8	1	1	...	10
1941 or earlier	361	18	10	12	401
Totals	2,741	37	36	206	3,020

RE-VACCINATIONS.

Typical Vaccinia greatest at 7th-10th day.	Accelerated (Vaccinoid) Reaction 5th-7th day.	Greatest Reaction 2nd-3rd day.	No Local Reaction.	Total.
1,191	581	1,260	211	3,243

Immunisation against Diphtheria.

Under the Health Act, the Corporation is required to make arrangements for the immunisation against diphtheria of pre-school and school children in their area.

In 1936, the Corporation authorised the re-introduction of a campaign in connection with active immunisation of children of school and pre-school ages. This scheme is being continued to cover the requirements of the Act. Every endeavour is being made to secure that as many infants as possible are immunised, whether by their own doctors or at clinic sessions organised by the Corporation.

The accompanying table gives the numbers reported to have been immunised and re-immunised during 1950.

The number of children fully immunised at schools during the year was 802; 1,119 were immunised at Child Welfare Clinics and records relating to 1,390 children fully immunised were sent to the Health and Welfare Department by general practitioners—a total of 3,311 as compared with 2,880 in 1949.

A record of the immunisation campaign in connection with school children is given under the section dealing with the School Health Service.

Immunisation against Whooping Cough.

During 1950, 900 children were reported by general practitioners to have been immunised, the immunisation material being a combined prophylactic against diphtheria and whooping cough. The number of children immunised during the year by the Medical Officers attached to the Health and Welfare Department totalled 306.

7.—PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

TUBERCULOSIS.

Introduction.

The Tuberculosis Scheme embraces institutional provision and specialist services controlled by the North-Eastern Regional Hospital Board, and the general preventive aspects administered by the Local Authority which include—

- (a) Measures for controlling the spread of infection, and
- (b) Measures for the care of persons suffering from tuberculosis and for the after-care of persons who have so suffered.

In general terms, the curative side of tuberculosis is in the hands of the Regional Hospital Board and the domiciliary supervision in those of the Corporation.

In previous Annual Reports stress has been laid on the need for the thorough examination of contacts and on the value of the advice given to domiciliary patients by the tuberculosis health visitors who are four in number.

One of the features of the tuberculosis statistics for 1950 is the diminution in the number of deaths from the disease. In 1950, there were 301 notifications, as compared with 250 in 1949. Of the 301 cases notified, 270 suffered from respiratory tuberculosis and 31 from non-respiratory tuberculosis. The relatively high incidence of respiratory tuberculosis is due partly to the inclusion of cases of "primary" tuberculosis in children under 15 years of age; these number 35. Such cases were, previous to 1948, classified as non-respiratory tuberculosis. If the cases of primary tuberculosis are deducted from the respiratory list, it will be found that the actual number of notifications of the adult type of respiratory tuberculosis amounts to 235, as compared with 198 in 1949.

Attention must again be drawn to the death-rates from tuberculosis in the City of Aberdeen. *The death-rates both from respiratory and from non-respiratory tuberculosis in 1950 are the lowest ever recorded.* In fact, the death-rate from all forms of tuberculosis in Aberdeen is less than half of that for all Scotland.

There are several factors which contribute to the low death-rate in Aberdeen. In this area it is possible to give institutional treatment promptly, the average period between notification and necessary admission to hospital being, on an average, under three weeks; the waiting list is consequently reduced to a minimum. Secondly, the use of new chemo-therapeutic agents, notably streptomycin, has saved several cases of generalised tuberculosis and tuberculous meningitis who otherwise would certainly have died. Then, again, there is in operation an increasingly successful range of surgical collapse methods in respiratory tuberculosis. Perhaps one of the most important reasons for the decline is that the Corporation have adopted the wise provision of granting, wherever possible, Council houses to cases suffering from "open" tuberculosis, so that a considerable degree of segregation of these infectious cases is effected.

Mortality.

There were 43 deaths from tuberculosis, 38 of these being due to respiratory tuberculosis, and 5 to non-respiratory tuberculosis.

The deaths from tuberculosis represent 1·9 per cent. of the total deaths from all causes, or approximately one out of every 53 deaths.

The deaths from respiratory tuberculosis and from other forms of tuberculosis in 1950, in the preceding five years, and in 1938, were as follows:—

	Respiratory.	Other.	Total.
1950	38	5	43
1949	60	6	66
1948	62	8	70
1947	65	12	77
1946	71	12	83
1945	70	15	85
Average—1945-1949 Quinquennium	66	10	76
1938	67	18	85

The deaths from respiratory tuberculosis and from non-respiratory tuberculosis for the years 1950, 1949, and 1938, arranged in age-groups, are given below:—

Deaths from Respiratory Tuberculosis—

	1950.	1949.	1938.
Under 1 year	—	1	—
1-5 years	—	1	1
5-15 years	—	1	—
15-25 years	3	6	14
25-35 years	7	12	16
35-45 years	9	16	10
45-55 years	7	9	13
55-65 years	6	9	6
65-75 years	3	5	7
75 years and over	3	—	—
	38	60	67

Deaths from Non-Respiratory Tuberculosis—

	1950.	1949.	1938.
Under 1 year	—	—	1
1-5 years	1	2	3
5-15 years	1	—	5
15-25 years	—	—	3
25-35 years	1	1	2
35-45 years	1	1	—
45-55 years	1	—	1
55-65 years	—	1	1
65-75 years	—	1	1
75 years and over	—	—	1
	5	6	18

The death-rates per 1,000 of population from tuberculosis in Scotland, and in the four large cities for the years 1950, 1949, and 1938, are given in the following table:—

	1950			1949			1938		
	Total	Resp.	Other	Total	Resp.	Other	Total	Resp.	Other
All Scotland .	0·54	0·47	0·07	0·67	0·60	0·08	0·69	0·52	0·17
Glasgow .	0·95	0·84	0·11	1·13	1·00	0·13	1·09	0·85	0·24
Edinburgh .	0·53	0·48	0·04	0·60	0·55	0·04	0·77	0·61	0·16
Dundee .	0·62	0·59	0·03	0·84	0·75	0·08	0·82	0·62	0·20
Aberdeen .	0·23	0·20	0·03	0·35	0·32	0·03	0·48	0·38	0·10

The accompanying chart shows the death-rates since 1856, together with a comparison between Aberdeen and all Scotland.

As regards the death-rate from respiratory tuberculosis, Aberdeen had a rate of 0·20 per 1,000 in 1950, as compared with a rate of 0·47 for all Scotland.

The death-rate from tuberculosis other than respiratory was 0·03 in Aberdeen in 1950, as against 0·07 for all Scotland.

A comparison with the death-rate at the beginning of the century shows a most remarkable decline in the tuberculosis mortality, and this is seen in the following table:—

	Estimated Population at mid-year.	Deaths from all causes.	Deaths from Tuberculosis.	Tuberculosis Death Rate per 100,000.	Percentage of Tuberculosis deaths to all deaths.
1900 .	150,906	2,866	346	229	12·1
1950 .	187,961	2,266	43	23	1·9

Of the 38 deaths from respiratory tuberculosis, 24 were in males and 14 in females. These were apportioned to the various age periods as under:—

DEATHS FROM RESPIRATORY TUBERCULOSIS IN 1950 IN AGE AND SEX GROUPS.									
Sex	0-5	5-15	15-25	25-35	35-45	45-55	55-65	65 +	Total
Male . .	—	—	1	5	5	6	4	3	24
Female . .	—	—	2	2	4	1	2	3	14

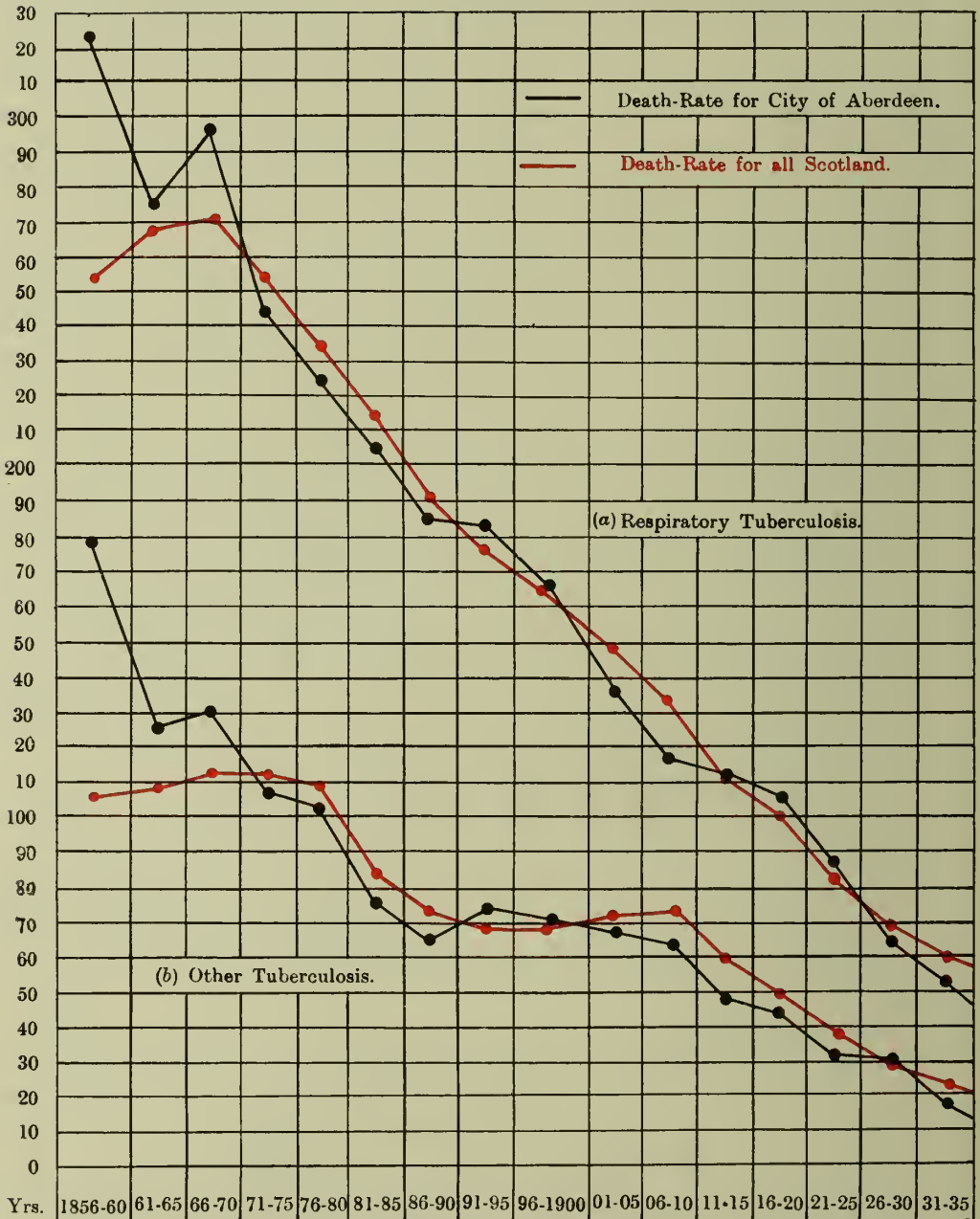
Of the five deaths from non-respiratory tuberculosis, one was under 5 years of age. The sites of the body affected in these cases were—

Brain membranes . . .	4 cases.
Kidneys . . .	1 case.

Notifications.

Table A gives the number of tuberculous cases notified during 1950, and, for comparative purposes the notifications for 1949 are also given. These are divided into respiratory and non-respiratory, and arranged according to sex and age period.

Deaths per 100,000 of Population. (Civilian



(a) RESPIRATORY TUBERCULOSIS.

Abdn.	322	274	298	243	223	204	184	181	167	138	116	111	106	88	62	52
All Scot.	253	266	270	254	234	213	190	175	166	143	131	110	99	81	68	59

(b) OTHER TUBERCULOSIS.

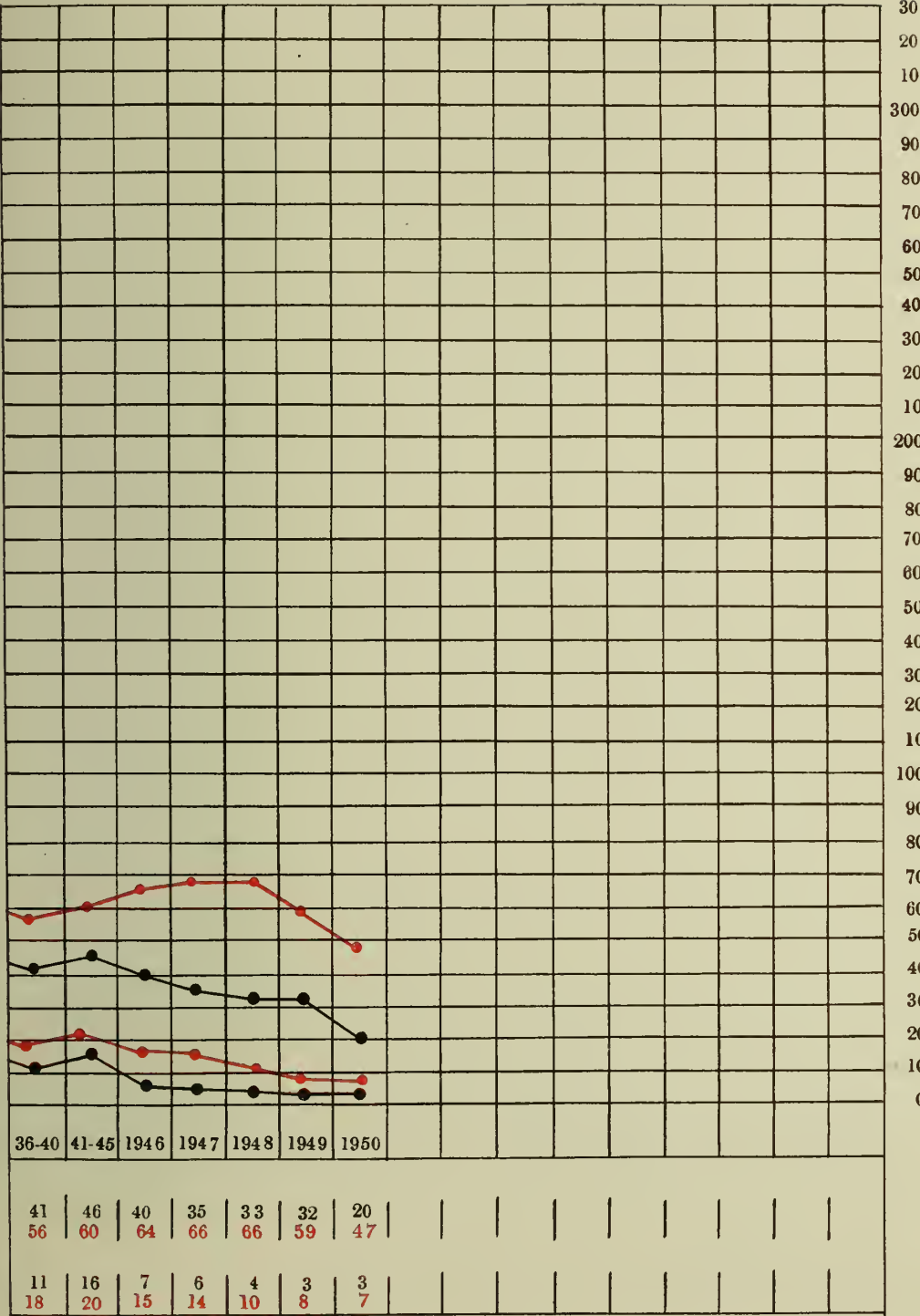
Abdn.	179	128	130	107	101	74	67	72	70	69	61	49	43	31	30	17
All Scot.	104	109	112	111	109	83	71	68	69	70	73	59	48	36	28	21

(Corrected for transferred deaths in 1904 and subsequent years.)

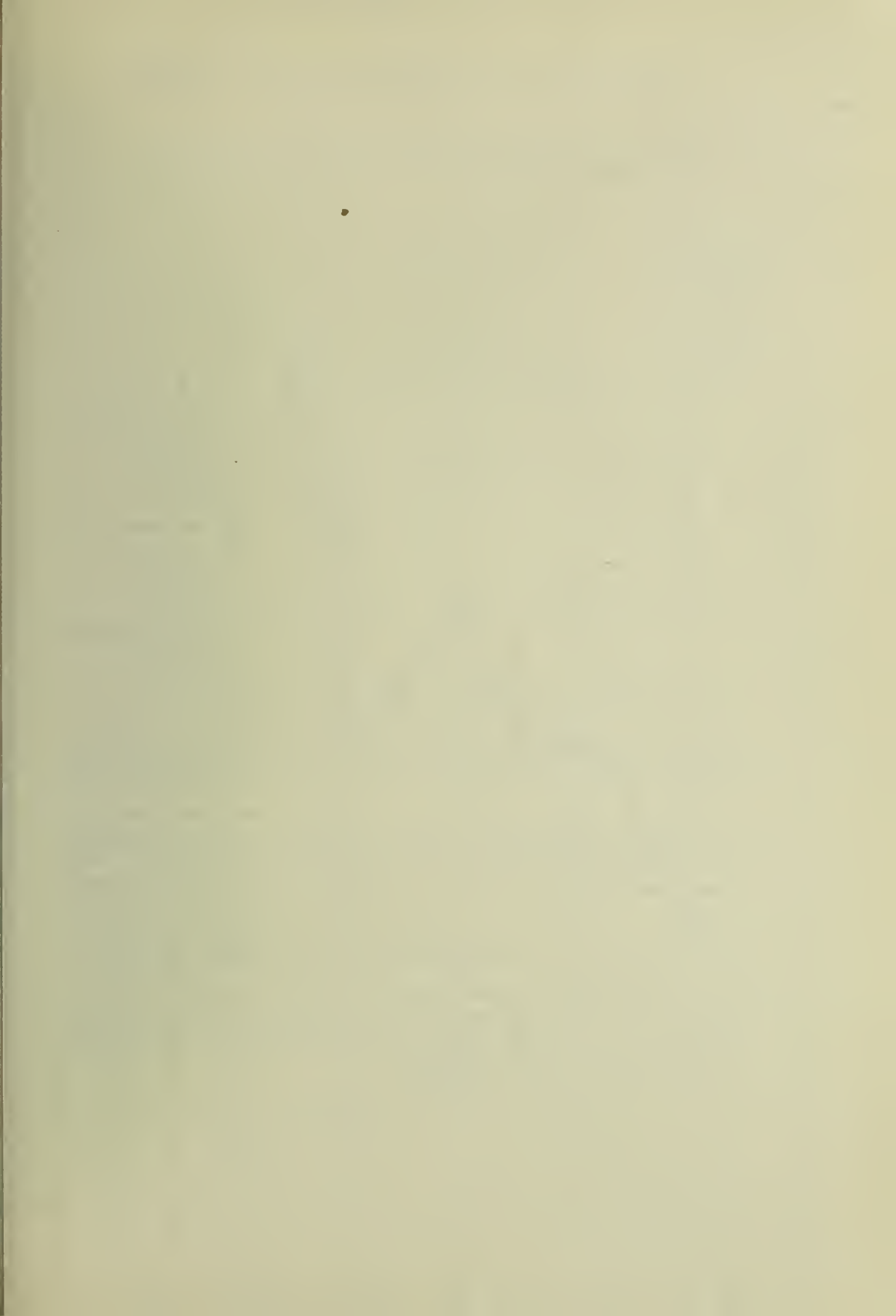
—QUINQUENNIAL PERIODS, to 1945.

BOTH SEXES.

Population and Civilian Deaths 1940-1946.)







CASES AND DEATHS FROM RESPIRATORY TUBERCULOSIS, 1940-1950

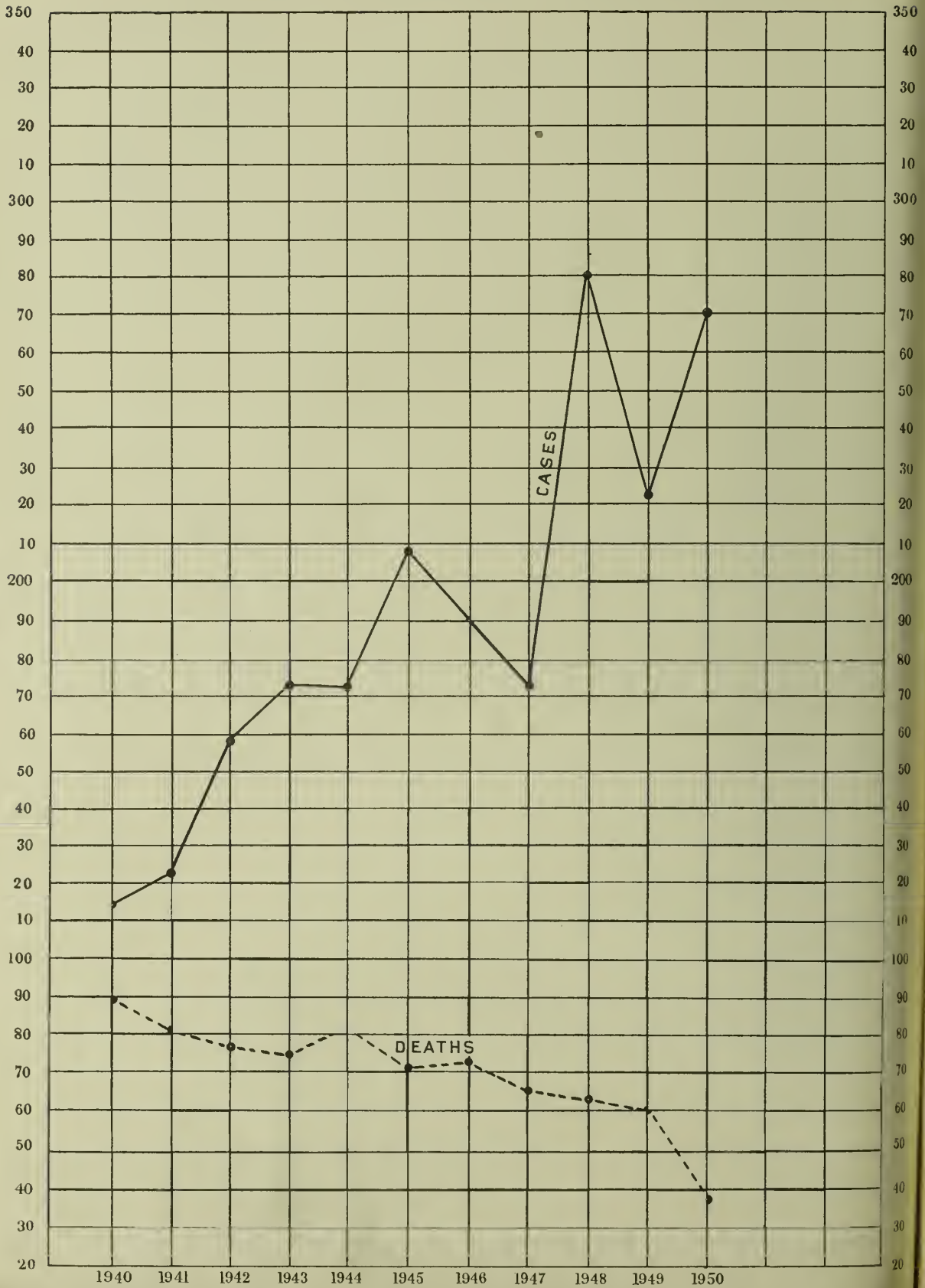


TABLE A.—NUMBER OF CASES OF TUBERCULOSIS NOTIFIED IN 1950.

	NUMBER OF CASES NOTIFIED AS SUFFERING FROM TUBERCULOSIS.										Cases removed to hospital.	Cases notified in a previous year and removed to hospital for the first time during 1950.
	AGE-GROUPS.											
	Under 1	1- 5.	5- 10.	10- 15.	15- 25.	25- 35.	35- 45.	45- 65.	65 up- wards.	TOTAL.		
RESPIRATORY.												
1950 Males	3	6	2	4	43	31	15	32	7	143	120	1
1949 Males	—	14	6	6	27	12	21	32	7	125	107	4
1950 Females	3	10	4	3	55	29	15	6	2	127	109	1
1949 Females	2	7	4	13	35	18	8	8	2	97	81	4
NON-RESPIRATORY.												
1950 Males	—	2	—	3	3	1	—	2	1	12	12	—
1949 Males	—	1	—	4	1	1	—	1	1	9	8	—
1950 Females	—	—	—	—	9	2	5	2	1	19	17	1
1949 Females	1	—	2	1	7	3	2	1	2	19	19	—
RESPIRATORY AND NON RESPIRATORY.												
1950 Male and Female	6	18	6	10	110	63	35	42	11	301	258	3
1949 Male and Female	3	22	12	24	70	34	31	42	12	250	215	8

The appended graph shows the relative morbidity and mortality from respiratory tuberculosis during the past few years. This graph gives the actual number of cases and deaths.

As regards the site of the disease, in the 31 cases notified as suffering from tuberculosis other than respiratory, 9 suffered from tuberculosis of the bones and joints, including spinal tuberculosis, 6 from tuberculous meningitis, 5 from tuberculous glands, 2 from abdominal tuberculosis, and 9 from generalised and other forms of tuberculosis, including lupus.

Of the 270 notified cases of respiratory tuberculosis, 268 were confirmed; and of the 31 non-respiratory cases, all were confirmed.

Table B shows the numbers of persons residing in Aberdeen who, at 31st December, 1950, were known to be suffering from tuberculosis, namely:—1,029 respiratory and 55 non-respiratory cases, a total of 1,084.

B.—NUMBER OF PERSONS RESIDING IN ABERDEEN AT 31ST DECEMBER, 1950, WHO WERE KNOWN TO BE SUFFERING FROM TUBERCULOSIS.

		NUMBER OF CASES IN AGE-GROUPS.									
		Under 1.	1 and under 5.	5 and under 10.	10 and under 15	15 and under 25.	25 and under 35.	35 and under 45	45 and under 65.	65 and up-wards.	TOTAL.
RESPIRATORY.											
1. Sputum or other material examined and tubercle bacilli found	Males ...	—	21	13	14	112	129	97	96	11	493
	Females	—	26	14	13	136	117	57	30	2	395
2. Sputum or other material examined and tubercle bacilli never found	Males ...	—	6	1	6	30	12	9	8	1	73
	Females	—	3	3	10	28	14	4	3	—	65
3. Sputum or other material not examined ...	Males ...	—	—	—	—	2	—	—	—	—	2
	Females	—	—	—	1	—	—	—	—	—	1
TOTAL		—	56	31	44	308	272	167	137	14	1029
NON-RESPIRATORY.											
1. Abdominal...	Males ...	—	—	1	1	1	—	—	—	—	3
	Females	—	—	—	—	3	3	1	—	—	7
2. Spine	Males ...	—	—	1	—	—	—	—	—	1	2
	Females	—	—	3	—	2	—	—	1	—	6
3. Bones and joints (exclusive of spine).....	Males ...	—	—	—	1	1	—	—	—	—	2
	Females	—	—	—	—	2	1	—	—	1	4
4. Superficial glands.....	Males ...	—	1	1	1	1	—	—	—	—	4
	Females	—	—	—	—	—	—	—	—	—	—
5. Lupus	Males ...	—	—	—	—	1	—	—	—	—	1
	Females	—	1	—	—	—	2	—	—	1	4
6. Other parts or organs	Males ..	—	1	1	—	6	—	—	—	1	9
	Females	—	—	2	2	6	2	1	—	—	13
TOTAL		—	3	9	5	23	8	2	1	4	55
RESPIRATORY AND NON-RESPIRATORY TOTAL		—	59	40	49	331	280	169	138	18	1084

Table C gives particulars of those who died during 1950, detailing the period which elapsed between notification and death and between discharge from institutions and death.

C. NUMBER OF PERSONS WHO DIED FROM TUBERCULOSIS IN ABERDEEN, WITH PARTICULARS AS TO PERIOD ELAPSING BETWEEN NOTIFICATION AND DEATH AND BETWEEN DISCHARGE FROM AN INSTITUTION AND DEATH—YEAR 1950.

	RESPIRATORY.		NON-RESPIRATORY.	
	Males.	Females.	Males.	Females.
	*	*	*	*
Number of Persons who died from Tuberculosis .	24 (40)	14 (20)	1 (4)	4 (2)
of whom—				
Not notified or notified only at or after death .	4 (1)	— (1)	— (—)	— (1)
Notified less than 1 month before death .	1 (7)	4 (5)	1 (1)	— (—)
" from 1 to 3 months " " " "	2 (4)	— (3)	— (—)	2 (—)
" " 3 to 6 " " " "	— (6)	1 (1)	— (—)	— (—)
" " 6 to 12 " " " "	— (2)	— (2)	— (1)	— (—)
" " 1 to 2 years " " " "	4 (3)	1 (—)	— (—)	2 (—)
" over 2 years	13 (17)	8 (8)	— (2)	— (1)
TOTAL	24 (40)	14 (20)	1 (4)	4 (2)
Number who died within 28 days after discharge from an institution	— (—)	— (1)	— (—)	— (—)
Number who died more than 28 days after discharge from an institution	6 (11)	4 (2)	— (1)	1 (—)

*1949 Figures in brackets.

Table D gives the number of cases who received treatment under the Tuberculosis Scheme in sanatoria or other institutions.

D. NUMBER OF CASES WITH THEIR HOME RESIDENCE IN ABERDEEN WHO RECEIVED TREATMENT IN SANATORIA OR OTHER INSTITUTIONS DURING THE YEAR ENDED 31ST DECEMBER, 1950.

	NUMBER OF PATIENTS.				
	In Institutions on January 1	Admitted during the year	Discharged during the year	Died in Institutions	In Institutions on December 31
RESPIRATORY.					
Adults . . . { Males	98	174	157	15	100
{ Females	76	164	141	9	90
Children . . . { Males	8	23	29	—	2
{ Females	6	22	24	—	4
NON-RESPIRATORY.					
Adults . . . { Males	1	6	1	—	6
{ Females	5	17	10	1	11
Children . . . { Males	2	4	1	1	4
{ Females	5	3	4	2	2
Total	201	413	367	28	219

B.C.G. Vaccination, 1950.

Each year a return has to be submitted to the Department of Health for Scotland giving details of the number of contacts tuberculin tested under the B.C.G. Vaccination Scheme and of the B.C.G. vaccinations performed. The information is contained in the accompanying return:—

I. NUMBER OF CONTACTS TUBERCULIN TESTED UNDER THE B.C.G. VACCINATION SCHEME.

RESULT	AGE GROUPS														Total Tests Performed	
	Under 1		1 and under 5		5 and under 10		10 and under 15		15 and under 20		20 and over					
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Positive . . .	2	3	20	19	20	29	39	44	15	19	...	...	96	114
Negative . . .	27	29	65	69	54	51	47	48	10	12	...	...	203	209
TOTAL . . .	29	32	85	88	74	80	86	92	25	31	...	...	299	323

II. B.C.G. VACCINATIONS PERFORMED.

GROUP	Tuberculin Tested		Negative Re-actors		Successfully Vaccinated.	
	M.	F.	M.	F.	M.	F.
(a) Nurses	7	193	2	51	2	51
(b) Medical Students	209	63	36	19	12	12
(c) Contacts	299	323	203	209	140	157
(d) Others	85	22	14	5	...	...

8.—CONTROL OF INFECTIOUS DISEASES.

INFECTIOUS DISEASES—MORBIDITY AND MORTALITY.

General.

In 1950, the outstanding variations in the number of infectious cases brought to the notice of the Health and Welfare Department, as compared with the preceding year, were as under:—

	1950.	1949.	Increase.	Decrease.
Dysentery . . .	67	34	33	—
Poliomyelitis . . .	36	3	32	—
Scarlet Fever . . .	513	275	238	—
*Measles . . .	26	402	—	376
Whooping Cough . .	449	58	391	—

* Voluntary notifications.

Cerebo-Spinal Fever.

Of this disease, 14 cases were notified in 1950. None of the cases proved fatal. In 1949, there were 9 cases, of whom one died.

Chickenpox.

During 1950, 26 cases of this disease were brought to the knowledge of the Department. This disease is not at present compulsorily notifiable.

Continued Fever (Undulant).

In 1950, 9 cases of undulant fever were notified. Four of the cases received institutional treatment.

Diphtheria.

The number of confirmed cases of this disease in 1950 was 2, as compared with 3 in 1949. During the decennium 1940-1949, the maximum number of cases occurred in 1940, when 586 cases were notified and 21 deaths occurred. As regards diphtheria mortality in 1946, a record was established when no deaths were registered. This record was maintained until April, 1950, when a death from laryngeal diphtheria occurred in a non-immunised child of seventeen months.

Both confirmed cases in 1950 occurred in children of seventeen months. The child not already referred to had been fully immunised. It was a case of moderate severity and made a complete recovery.

The accompanying chart gives the attack incidence (per 10,000 of population), and death-rate (per 100,000 of population) from 1882 to 1950.

Diphtheria Immunisation.

Statistics of the work carried out during 1950 are given in Section A6 of this Report.

Dysentery.

In 1950 there were 67 notifications of this disease, as compared with 34 in 1949, and an annual average of 188 in the decennium 1940-1949. No deaths occurred in 1950.

Encephalitis Lethargica.

One death occurred during 1950—a male adult; the disease was of 25 years' duration, and the case had not previously been notified.

Erysipelas.

There were 37 cases of erysipelas in 1950, as compared with an annual average of 82 in the preceding decennium. There were no deaths in 1950.

Infective Jaundice.

During the year there were 10 confirmed cases of this disease. Of these, 8 were either fishworkers or workers associated with the fish trade. Of the 2 remaining cases, one was employed as a stableman and the other was a farm labourer. None of the cases proved fatal.

Measles.

Compulsory notification of this disease in Aberdeen was discontinued in 1903. In 1950, 26 cases were voluntarily notified, and there was one death in a child of eight months. During 1949, 402 cases were voluntarily notified, and one death was reported.

Ophthalmia Neonatorum.

No cases were notified during 1950.

Pneumonia, Acute Influenzal.

Thirty-two cases of acute influenzal pneumonia were notified in 1950. The majority of these cases occurred in December, 1950. There were 7 deaths, all in persons over 65 years of age. In the preceding year, 10 cases were notified with 4 deaths.

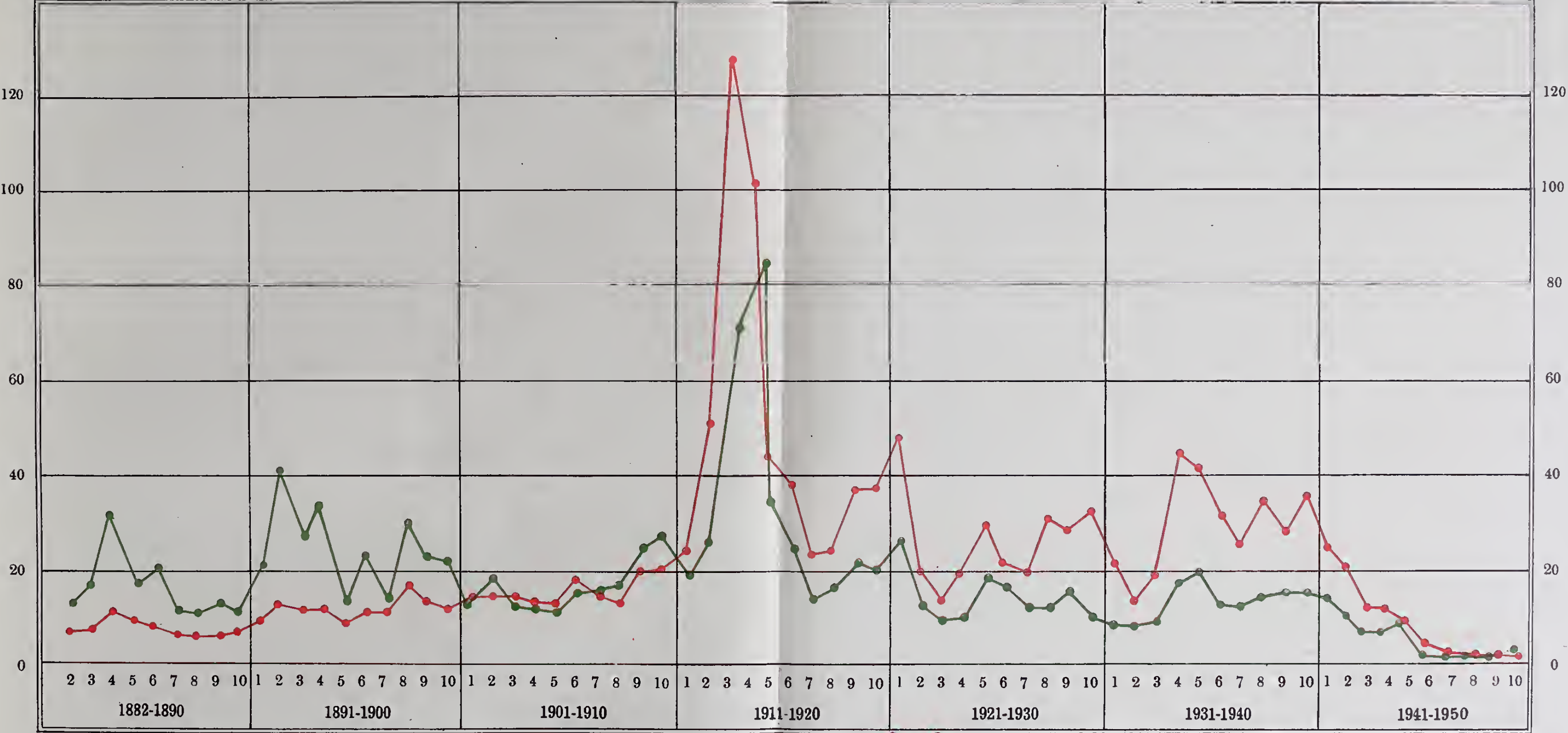
Pneumonia, Acute Primary.

During 1950 422 cases were notified. There were 58 deaths. During the preceding ten years the annual average number of cases was 416, the annual average number of deaths being 45. In December, 1950, there was a sharp increase in the notification of cases and of deaths, there being 97 cases notified in December as compared with 16 cases in November, and 25 deaths in December as compared with 1 death in November. December was an exceptionally cold month, and, according to the meteorological report, was the coldest December in Scotland for 64 years. Of the 422 cases in 1950, 350 cases or 83 per cent. received institutional treatment.

Poliomyelitis (Infantile Paralysis).

The first major epidemic of Poliomyelitis in Scotland occurred in 1947 and the second in 1950. In both of these years there was an increased prevalence in the City of Aberdeen. The number of confirmed cases notified in the City in 1950 was 36, and of these, 2 died, giving a mortality rate of 5.6 per cent. In the 1947 City epidemic 48 cases were notified, and there were 6 deaths.

ABERDEEN



DIPHTHERIA—
Attack Incidence per 10,000 of population
Deaths per 100,000 of population
in each year 1882-1950

It was considered advisable to slow down the scheme of immunisation of children against diphtheria in view of the rather remote possibility that the inoculation may precipitate an already developing attack of poliomyelitis.

Seasonal Incidence.

The following statement gives the monthly incidence of the 1950 outbreak:—

POLIOMYELITIS—1950 : MONTHLY INCIDENCE.

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Total.
Cases	1	—	2	3	4	8	6	6	5	1	36
Deaths	—	—	—	—	—	1	—	1	—	—	2

In the 1947 epidemic the onset occurred in July, and the epidemic reached its peak in September.

Sex and Age Incidence.

Of the 36 cases notified in 1950, 17 were males and 19 females. The deaths were 2 females, aged 15 years and 46 years, respectively. The analysis of the cases in the various age-groups is as follows:—

Cases	Total	Under 1 year	Years 1-2	Years 2-5	Years 5-15	Years 15-25	Years 25-35	Years 35-45	Years 45-65
Males	17	1	5	4	3	2	1	1	—
Females	19	—	2	8	5	1	1	1	1
Total Cases . .	36	1	7	12	8	3	2	2	1
Percent. of Total	100	3	19	33	22	8	6	6	3

It is of interest to note the age groups affected in various epidemics, and in the following two Tables are given the age incidence and ages at death in respect of cases occurring in 1950, 1947, and 1944:—

Cases

Year	Total Cases	Under 1 year		1-2 years		2-5 years		5-15 years		15-25 years		25 years and over	
		No.	Per cent. of Total	No.	Per cent. of Total	No.	Per cent. of Total	No.	Per cent. of Total	No.	Per cent. of Total	No.	Per cent. of Total
1950	36	1	2.8	7	19.4	12	33.3	8	22.2	3	8.3	5	14.0
1947	48	1	2.1	8	16.7	16	33.3	17	35.4	3	6.2	3	6.2
1944	*20	2	15.0	3	15.0	4	20.0	7	35.0	—	0.0	3	15.0

* Including 5 cases where diagnosis was made in Institutions in Aberdeen but the usual residences were outwith the City.

Deaths.

Year	Total Deaths	Under 1 year	1-2 years	2-5 years	5-15 years	15-25 years	25 years and over
1950	2	—	—	—	—	1	1
1947	6	—	1	2	2	—	1
1944	4	1	—	—	*2	—	1

* 2 deaths transferred to usual residences outwith Aberdeen.

Location of Paralysis.

The location of paralysis with the sufferer classified in age-groups is given below.

	Total	Under 1 year	1-5 years	5-15 years	15-25 years	25-35 years	35 years and over
No Paralysis	3	—	—	2	—	1	—
Paralysis of Arm	8	1	6	—	—	—	1
Paralysis of Leg	13	—	10	3	—	—	—
Paralysis of Arm and Leg	5	—	1	2	—	1	1
Paralysis of all Limbs	2	—	—	1	1	—	—
Ascending Paralysis	1*	—	—	—	—	—	1
Polioencephalitis	1*	—	—	—	1	—	—
Paralysis of Face	3	—	2	—	1	—	—
	36	1	19	8	3	2	3

* Died.

All the cases notified in 1950 were treated in hospital—33 in the City (Fever) Hospital, and 3 in the Royal Aberdeen Hospital for Sick Children.

Puerperal Fever and Puerperal Pyrexia.

During 1950, 46 cases of puerperal fever and puerperal pyrexia were notified. Thirty-five cases were confirmed as suffering from puerperal fever. There were no deaths registered from this cause. The annual average number of cases and deaths in the preceding ten years was 34 and 2 respectively.

Eleven cases were classified as cases of puerperal pyrexia. In the preceding ten years, the annual average number of these cases was 26.

For further details regarding puerperal fever and puerperal pyrexia, reference should be made to the section of the Report dealing with the Care of Mothers and Young Children.

Scarlet Fever.

In 1950, 513 cases of scarlet fever were notified, as against an annual average of 263 in the decennium 1940-1949. There were no deaths in 1950.

Smallpox.

Aberdeen has remained free from smallpox since 1930.

Analysis of the vaccinations reported during 1950 as being carried out by general practitioners and at child welfare clinics is given in Section A6 of this Report.

Tuberculosis.

There were notified in 1950, 301 cases of tuberculosis, as compared with 250 in 1949 and an annual average of 233 cases in the 1940-1949 decennium. Forty-three deaths occurred in 1950, as against 66 in 1949, and an annual average of 91 in the above-mentioned decennium.

The incidence and mortality are analysed in detail in Section A7.

Typhoid and Paratyphoid Fevers.

Two cases of typhoid fever were notified in 1950.

Whooping Cough.

On 1st January, 1950, this disease became compulsorily notifiable. The number of cases notified during 1950 was 449. In the preceding year, 58 cases were voluntarily reported. During 1949 and 1950 no deaths occurred.

Whooping cough immunisation among infants and pre-school children is carried out at the various Child Welfare Centres and at home by general practitioners. During 1950 the number of children so immunised was 1,206.

The following Tables deal with the various infectious diseases. Table I shows the seasonal variations in the prevalence of each infectious disease, whether compulsorily notifiable or not. In Table II are given the morbidity of and mortality from infectious diseases, classified according to age and to the allocation of patients to institutions for purposes of treatment. In Table III the cases and deaths are detailed for each of the years from 1940 to 1950.

TABLE I.—PROGRESS OF INFECTIOUS DISEASES DURING
TWELVE MONTHS—YEAR, 1950.

Disease.		1950.												Whole Year.
		Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	
Cerebro-spinal Fever.	{ Cases	1	—	3	2	1	—	1	—	2	—	—	4	14
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
*Chickenpox	{ Cases	5	5	1	3	2	—	—	2	2	3	—	3	26
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever (Undulant)	{ Cases	1	—	1	—	—	1	1	2	1	1	—	1	9
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	{ Cases	1	—	—	1	—	—	—	—	—	—	—	—	2
	{ Deaths	—	—	—	1	—	—	—	—	—	—	—	—	1
Dysentery	{ Cases	—	7	1	2	—	20	3	4	4	—	2	24	67
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	{ Cases	—	—	—	—	1	—	—	—	—	—	—	—	1
Lethargica	{ Deaths	—	—	—	—	1	—	—	—	—	—	—	—	1
Erysipelas	{ Cases	4	5	9	2	6	4	1	—	2	1	3	—	37
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Jaundice, Acute Infective	{ Cases	1	—	—	—	—	1	2	1	1	1	1	2	10
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	{ Cases	—	—	—	3	1	1	—	1	1	—	—	1	8
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
*Measles	{ Cases	2	3	2	1	1	2	7	5	—	2	—	1	26
	{ Deaths	—	—	—	—	—	—	1	—	—	—	—	—	1
Ophthalmia Neonatorum	{ Cases	—	—	—	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Plague	{ Cases	—	—	—	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia, Acute	{ Cases	59	61	57	34	28	19	12	3	18	18	16	97	422
Primary	{ Deaths	4	5	9	3	2	1	3	—	2	3	1	25	58
Pneumonia Acute	{ Cases	4	—	2	—	—	—	1	—	—	—	1	24	32
Influenzal	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	7	7
Poliomyelitis, Acute	{ Cases	1	—	2	3	4	8	6	6	5	1	—	—	36
	{ Deaths	—	—	—	—	—	1	—	1	—	—	—	—	2
Puerperal Fever	{ Cases	5	2	5	4	5	4	4	1	2	1	2	—	35
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	{ Cases	1	1	—	3	2	2	—	—	—	1	—	1	11
Scarlet Fever	{ Cases	34	23	42	30	37	30	24	23	33	69	91	77	513
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox	{ Cases	—	—	—	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis, Respiratory	{ Cases	24	14	28	28	23	38	20	24	21	14	20	16	270
	{ Deaths	5	—	5	1	3	2	5	5	—	2	3	7	38
Tuberculosis, Non-respiratory	{ Cases	3	1	6	2	7	2	1	4	4	—	1	—	31
	{ Deaths	—	—	—	—	1	1	1	1	—	—	—	1	5
Typhoid Fever	{ Cases	—	1	1	—	—	—	—	—	—	—	—	—	2
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Para-Typhoid A.	{ Cases	—	—	—	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Para-Typhoid B.	{ Cases	—	—	—	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhus Fever	{ Cases	—	—	—	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	{ Cases	56	92	38	54	52	45	29	26	9	12	21	15	449
	{ Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	{ Cases	202	215	198	172	170	177	112	102	105	124	158	266	2001
	{ Deaths	9	5	14	5	7	5	9	8	2	5	4	40	113
Influenza, excl. Influenzal Pneumonia	{ Deaths	—	—	—	1	—	—	—	—	—	—	—	5	6

*Not compulsorily notifiable.

TABLE II.—MORBIDITY AND MORTALITY FROM INFECTIOUS DISEASES DURING 1950—

DISEASE		NO. OF CASES AND DEATHS AT VARIOUS AGE-PERIODS								Cases receiving Institutional Treatment	Cases not receiving Institutional Treatment
		At all Ages	YEARS								
			Under 1	1-5	5-15	15-25	25-45	45-65	65+		
Cerebro-spinal Fever	{ Cases	14	4	5	3	2	—	—	—	14	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
*Chicken Pox...	{ Cases	26	—	13	10	3	—	—	—	25	1
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Cholera	{ Cases	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Continued Fever (undulant)	{ Cases	9	—	—	—	—	7	1	1	4	5
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Diphtheria . . .	{ Cases	2	—	2	—	—	—	—	—	2	—
	{ Deaths	1	—	1	—	—	—	—	—	1	—
Dysentery	{ Cases	67	1	51	8	3	2	1	1	52	15
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Encephalitis	{ Cases	1	—	—	—	—	1	—	—	—	1
Lethargica...	{ Deaths	1	—	—	—	—	1	—	—	—	1
Erysipelas	{ Cases	37	—	—	2	—	7	20	8	23	14
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Infective Jaundice ...	{ Cases	10	—	—	—	2	6	2	—	7	3
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Malaria	{ Cases	8	—	—	—	6	1	1	—	8	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
*Measles	{ Cases	26	4	11	8	2	1	—	—	14	12
	{ Deaths	1	1	—	—	—	—	—	—	1	—
Ophthalmia Neonatorum	{ Cases	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Plague	{ Cases	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Pneumonia, Acute Influenzal	{ Cases	32	—	1	—	2	4	5	20	10	22
	{ Deaths	7	—	—	—	—	—	—	7	—	7
Pneumonia, Acute Primary	{ Cases	422	40	67	37	35	69	86	88	350	72
	{ Deaths	58	12	—	2	2	—	11	31	44	14
Poliomyelitis, Acute	{ Cases	36	1	19	8	3	4	1	—	36	—
	{ Deaths	2	—	—	—	1	—	1	—	2	—
Puerperal Fever	{ Cases	35	—	—	—	7	28	—	—	35	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	{ Cases	11	—	—	—	3	8	—	—	11	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Scarlet Fever...	{ Cases	513	1	142	317	36	15	2	—	243	270
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Small-pox . . .	{ Cases	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Tuberculosis Respiratory	{ Cases	270	6	16	13	98	90	38	9	229	41
	{ Deaths	38	—	—	—	3	16	13	6	22	16
Tuberculosis Non-respiratory	{ Cases	31	—	2	3	12	8	4	2	29	2
	{ Deaths	5	—	1	1	—	2	1	—	5	—
Typhoid Fever	{ Cases	2	—	—	1	—	—	1	—	2	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Paratyphoid A	{ Cases	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Paratyphoid B	{ Cases	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Typhus Fever	{ Cases	—	—	—	—	—	—	—	—	—	—
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Whooping Cough	{ Cases	449	63	204	178	—	2	2	—	29	420
	{ Deaths	—	—	—	—	—	—	—	—	—	—
Total ...	{ Cases	2001	120	533	588	214	253	164	129	1123	878
	{ Deaths	113	13	2	3	6	19	26	44	75	38

* Not compulsorily notifiable.

TABLE III.—MORBIDITY AND MORTALITY FROM INFECTIOUS DISEASES DURING
EACH YEAR FROM 1940 TO 1950.

Disease.	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	ANNUAL AVERAGE 1940 to 1949.
Cerebro-Spinal Fever	Cases 14	9	5	12	28	25	8	16	20	51	94	26.8
	Deaths —	1	2	2	0	3	0	8	3	5	14	3.8
*Chickenpox	Cases 26	23	62	23	60	14	36	44	60	18	31	37.1
	Deaths 0	0	0	0	0	0	0	0	0	0	0	0.0
Continued Fever (Undulant)	Cases 9	4	1	3	4	1	1	1	9	2	0	2.6
	Deaths 0	0	0	0	0	0	0	0	1	0	0	0.1
Diphtheria	Cases 2	3	4	9	68	136	153	156	331	372	586	181.8
	Deaths 1	0	0	0	0	9	5	5	15	19	21	7.4
Dysentery	Cases 67	34	137	13	100	331	83	335	396	248	198	187.5
	Deaths 0	0	1	0	0	3	5	6	10	8	5	3.8
Encephalitis Lethargica	Cases 1	0	0	0	0	0	0	0	1	1	0	0.2
	Deaths 1	0	0	0	0	0	0	0	1	1	0	0.2
Erysipelas	Cases 37	48	64	65	104	79	54	90	114	92	110	82.0
	Deaths 0	0	0	0	2	2	0	1	2	0	1	0.8
Infective Jaundice	Cases 10	11	10	6	6	4	4	6	10	17	13	8.7
	Deaths 0	1	3	0	2	0	0	1	0	3	1	1.1
Malaria	Cases 8	9	4	9	23	0	0	1	1	0	4	5.1
	Deaths 0	0	0	0	0	0	0	0	0	0	0	0.0
*Measles	Cases 26	402	199	527	500	887	245	501	528	136	1571	549.6
	Deaths 1	1	1	3	0	3	0	2	4	4	12	3.0
Ophth. Neonatorum	Cases 0	1	3	7	6	3	6	8	7	12	22	7.5
	Deaths 0	0	0	0	0	0	0	0	0	0	0	0.0
Plague	Cases 0	0	0	0	0	0	0	0	0	0	0	0.0
	Deaths 0	0	0	0	0	0	0	0	0	0	0	0.0
Pneumonia, Acute Influenzal	Cases 32	10	7	4	13	3	12	56	1	19	19	14.4
	Deaths 7	4	3	2	7	0	2	27	1	4	10	6.0
Pneumonia, Acute Primary	Cases 422	443	444	404	379	347	424	447	374	423	475	416.0
	Deaths 58	41	42	53	38	34	40	50	46	41	68	45.3
Poliomyelitis, Acute	Cases 36	3	5	48	1	0	20	1	0	2	3	8.3
	Deaths 2	0	0	6	0	0	2	0	0	0	0	0.8
Puerperal Fever	Cases 35	46	25	42	52	37	24	40	15	27	34	34.2
	Deaths 0	1	0	1	1	2	1	2	5	3	2	1.8
Puerperal Pyrexia	Cases 11	13	34	33	26	4	13	19	41	30	46	25.9
Scarlet Fever	Cases 513	275	252	205	465	316	202	231	234	179	266	262.5
	Deaths 0	0	1	0	0	0	0	1	0	0	0	0.2
Smallpox	Cases 0	0	0	0	0	0	0	0	0	0	0	0.0
	Deaths 0	0	0	0	0	0	0	0	0	0	0	0.0
Tuberculosis, Respiratory	Cases 270	222	279	172	190	207	171	173	158	122	115	180.9
	Deaths 38	60	62	65	71	70	82	74	76	80	87	72.7
Tuberculosis, Non- Respiratory	Cases 31	28	37	53	50	48	63	58	61	64	55	51.7
	Deaths 5	6	8	12	12	15	34	26	31	23	18	18.5
Typhoid and Para- typhoid Fevers	Cases 2	4	30	6	2	7	3	0	3	11	15	8.1
	Deaths 0	0	0	1	0	0	0	0	0	1	0	0.2
Typhus Fever	Cases 0	0	0	0	0	0	0	0	0	0	0	0.0
	Deaths 0	0	0	0	0	0	0	0	0	0	0	0.0
Whooping Cough	Cases 449	58	194	176	151	195	346	165	243	321	369	221.8
	Deaths 0	0	2	5	3	4	2	3	5	7	12	4.3
Influenza, excl. Influenzal Pneumonia	Deaths 6	6	1	0	2	7	5	20	3	10	18	7.2

*Not compulsorily notifiable.

9.—MENTAL HEALTH SERVICES.

The Corporation have now no responsibility for institutional care of the mentally sick, but they are still responsible for the ascertainment, the care, and after-care of patients in their own homes.

Under arrangements with the Executive Council, the certification of insane persons is carried out by general practitioners. Where a person certified as insane is placed under guardianship or boarded out, or liberated on probation from a mental hospital, the Regional Hospital Board meet the cost of his maintenance, but the Board have asked the Corporation to assist them meantime in the discharge of this function. In the case of mental defectives under guardianship, the responsibility for making arrangements for, and meeting the expenses of, guardianship continues to rest with the Education Committee where the children are between 5 and 16 years and are educable. and with the Health and Welfare Committee in all other cases. In carrying out the duties relating to mental illness and mental deficiency, the Medical Officer of Health and his medical staff have the valuable assistance of the Professor of Mental Health, the Physician Superintendents of Kingseat Mental Hospital and of the Royal Mental Hospital, and the Medical Officer for Mental Health employed by the Regional Hospital Board.

In accordance with the Corporation's proposals for the Discharge of Functions relating to Mental Health Services, the Corporation have appointed an authorised officer whose duties are (1) to make arrangements for the detention of persons apparently of unsound mind who have no relatives or friends willing or able to take such action; (2) to ensure that adequate domestic arrangements have been made when it is proposed to discharge insane persons from mental hospitals; (3) on the instructions of the Medical Officer of Health, to take steps to remove, pending the presentation of a petition, a supposed defective who is neglected, cruelly treated, or without visible means of support, to a place of safety; and (4) to deal with certain types of mentally handicapped children.

The North-Eastern Regional Hospital Board have appointed a specialist Medical Officer for Mental Health. The services of this Medical Officer in the assessment of mental deficiency and in the certification of insane persons have proved most valuable, and are much appreciated both by the general practitioners and by the medical staff of the Health and Welfare Department.

All cases released from institutions on probation or boarded out within the City are visited regularly by the authorised officer and by one of the medical staff. Those released on licence are visited by the Medical Officer for Mental Health.

Mentally handicapped children of the ineducable type are sent to certified institutions, such as Woodlands Home, Cults—an institution originally acquired by the Corporation—or placed under suitable guardianship if they require more attention than can be given in their own homes.

So far as training and occupation are concerned, the Corporation propose to establish within the City training and occupational centres for mentally ill and mentally handicapped persons who are undergoing domiciliary supervision. It is proposed that, at these centres, such work as cobbling, pottery, and leather work will be undertaken.

In 1938, the Corporation and the County Councils of Aberdeen and Kincardine decided to avail themselves of the services of the Department of Mental Health of Aberdeen University. The local authorities had the services of the Professor of Mental Health and his psychiatric social worker and, in return, paid an appropriate sum to the University Authorities. The total number of City cases dealt with each year is approximately 550. In view of the difficulty of obtaining psychiatric social workers, the Corporation, by arrangement with the Regional Hospital Board have obtained the services of social workers in the employment of the Department of Mental Health of Aberdeen University.

In 1944, a Child Guidance Clinic was established at the Royal Aberdeen Hospital for Sick Children. Arrangements have been made with the University of Aberdeen whereby the Corporation's Medical Officers may refer certain children resident within the City to this Clinic, and, during the year, approximately 100 such children were dealt with. Specialist medical services are provided free through the North-Eastern Regional Hospital Board.

10.—WORK UNDER NURSERIES AND CHILD-MINDERS REGULATION ACT.

The Nurseries and Child-minders Regulation Act, 1948, came into operation on 30th July, 1948. This Act empowers local health authorities to supervise (i) nurseries where children up to school age are looked after for a day, or for longer periods not exceeding six days, and (ii) persons who, for reward, undertake the care of children under the age of 5 years for similar periods.

At the end of 1950 only two applications for registration had been made to the Corporation.

B.—SCHOOL HEALTH SERVICE.

The Report on the School Health Service for the year ended 31st July, 1950, is herewith submitted:—

GENERAL STATISTICS.

Number of Schools—

(a) Primary — Under Education Authority	32
(b) Junior Secondary Do. Do.	9
(c) Secondary Do. Do.	3
(d) Nursery Do. Do.	4
(e) (i) Special Schools	2
(ii) Special Classes in ordinary schools	—
(iii) Nursery Classes	6
(f) In receipt of grant from Education Committee and under Medical Inspection	2

Number of children on the registers (*i.e.*, for whole area—Not individual schools) 28,183

Number of children in average attendance (*i.e.*, for whole area—Not individual schools) 26,639

THE FINDINGS OF MEDICAL INSPECTION.

Preliminary Inspection of “Entrants.”

Examination of five-year-old children when they enter school revealed the following details:—

Total number inspected	2,098
<hr/>	
Dirty heads—	
Nits	69 or 3·3 per cent.
Vermin . . . . .	.....
Squints	148 or 7·1 per cent.
Other diseases	31 or 1·5 per cent.
Number excluded for various infections	4 or 0·2 per cent.
Unsatisfactory footgear	3 or 0·1 per cent.
Unsatisfactory clothing	9 or 0·4 per cent.

Systematic Medical Examinations.

Details as to the number and percentage of individual children in each age-group suffering from particular defects are given in Table II at the end of the School Health Section of this Report.

A summary of the systematic medical examinations is herewith submitted:—

	Number Examined.	Number found Defective.	Percentage.
1. Clothing unsatisfactory	7,746	11	·1
2. Footgear unsatisfactory	„	11	·1
3. Cleanliness—			
(a) Head—			
Nits	„	53	·7
Vermin	„	1	·01
(b) Body—			
Dirty	„	17	·2
Vermin	„	—	—
4. Skin—			
(a) Head—			
Ringworm	„	1	·01
Impetigo	„	30	·4
Other diseases	„	11	·1
(b) Body—			
Ringworm	„	2	·03
Impetigo	„	1	·01
Scabies	„	3	·04
Other diseases	„	192	2·5
5. Nutritional State—			
Slightly defective	„	26	·3
Bad	„	—	—
6. Mouth and teeth unhealthy	„	83	1·1
7. Naso-pharynx—			
(a) Nose—			
(i) Obstruction requiring observation	„	601	7·8
(ii) Obstruction requiring operative treatment	„	29	·4
(iii) Other conditions	„	13	·2
(b) Throat—			
(i) Tonsils requiring observation	„	1,632	21·1
(ii) Tonsils requiring operative treatment	„	111	1·4
(c) Glands—			
(i) Requiring observation	„	183	2·4
(ii) Requiring operative treatment	„	2	·03
8. Eyes—			
(a) External Diseases—			
Blepharitis	„	97	1·3
Conjunctivitis	„	5	·06
Corneal Opacities	„	4	·05
Strabismus	„	392	5·1
Other diseases	„	67	·9
(b) Visual acuity with/without glasses—			
Fair	5,337	1,088	20·4
Bad	„	96	1·8
Recommended for Refraction	„	348	6·5

	Number Examined.	Number found Defective.	Percentage.
9. Ears—			
(a) Diseases—			
Otorrhoea	7,746	77	1·0
Other diseases	„	44	·6
(b) Defective hearing—			
Grade I	5,337	6	·1
10. Speech—			
Defective articulation	7,746	22	·3
Stammering	„	23	·3
11. Mental and Nervous Conditions—			
(a) Backward	„	3	·04
(b) Dull	„	2	·03
(c) Mentally deficient (educable)	„	1	·01
(d) Mentally deficient (ineducable)	„	1	·01
(e) Highly nervous or unstable	„	14	·2
(f) Difficult in behaviour	„	3	·04
12. Circulatory System—			
(a) Organic heart disease—			
(i) Congenital	„	8	·1
(ii) Acquired	„	12	·2
(b) Functional conditions	„	22	·3
13. Lungs—			
Chronic bronchitis	„	4	·05
Suspected tuberculosis	„	25	·3
Other diseases	„	201	2·6
14. Deformities—			
(a) Congenital	„	23	·3
(b) Acquired (infantile paralysis)	„	12	·2
(c) Acquired (probably rickets)	„	121	1·6
(d) Acquired (other causes)	„	207	2·7
15. Infectious disease	„	11	·1
16. Other diseases or defects	„	777	10·0
17. Classification—			
Group I (3,074)	„	—	39·7
Group IIa	5,337	710	13·3
Group IIb	7,746	19	·2
Group IIc	5,337	3	·06
Group III	7,746	2,999	38·7
Group IVa	„	720	9·3
Group IVb	„	221	2·9
Number notified to parents as suffering from defects	„	866	11·2
Number under observation	„	3,360	43·4
Number of parents present at inspection (6,213)	„	—	80·2
Number wearing glasses	„	582	7·5

*HEIGHTS AND WEIGHTS.

Boys.

		Age.	Number Examined.	Average Age.	Average Height in Inches.	Average Weight in Lbs.
1949-50	.	5	945	53	42.8	42.8
"	.	9	1202	95	51.6	63.6
"	.	13	1301	135	59.0	91.6
"	.	16	188	166	67.6	135.3

Girls.

		Age.	Number Examined.	Average Age.	Average Height in Inches.	Average Weight in Lbs.
1949-50	.	5	918	53	42.1	40.7
"	.	9	1099	95	51.0	61.3
"	.	13	1341	136	59.6	95.9
"	.	16	132	166	63.9	120.9

* For years 1929 onwards, see Table V. (pp. 48-49).

Medical Treatment.

A—MINOR AILMENTS.

(1) *Cuts, Bruises, Sprains, and minor injuries, &c.*

Cases occurring in schools while any of the medical or nursing staff are in the school are dealt with by them, but many cases are given First-aid treatment by the teaching staff, many of whom have First-aid training. Cases which require further treatment are referred to their own doctors, or, if of a serious nature, *e.g.*, fractures, to the Casualty Departments of the General Hospitals, after consultation with the family doctors.

(2) *Diseases of the Ear, Nose, and Throat.*

The attendances at the Ear, Nose, and Throat Clinic for the school year 1949-50 are as follows:—

Number of new cases	132
Number referred to hospital	49
Number referred to own doctor	6
Number treated at clinic	52
Number discharged requiring no treatment	25
Total attendances at clinic	2,343
Number discharged cured	66

Approximately 85 per cent. of the new cases are cases of diseases of the ear alone. Most cases of enlarged tonsils and adenoids are not referred to the Ear, Nose, and Throat Clinic but are referred to the family doctors in the first instance.

(3) *Diseases of the Eye, excluding Defective Vision.*

These cases continue to be referred, by arrangement, to the Eye Institution, 142, King Street, Aberdeen. The number of cases so referred was 64 of epidemic conjunctivitis and 22 of severe blepharitis.

(4) *Diseases of the Skin.*

Ringworm (scalp)—

(a) X-ray treatment	0
(b) Other treatment	1

Ringworm (body) 10

All cases of ringworm are referred, by arrangement, for treatment at the Skin Out-Patient Department, Aberdeen Royal Infirmary, Woolmanhill.

With regard to impetigo, 135 children were treated at the School Skin Clinic, Dispensary Buildings, Guestrow, Aberdeen; 828 attendances were involved.

With regard to scabies, these cases are usually referred for treatment to the Cleansing Station at the City (Fever) Hospital, along with all contacts, adults as well as children. Fifty-five families, of whom one or more school-child members of the family were found to be suffering from scabies, were so dealt with, involving a total of 126 adults, 116 school children, and 49 children under school age.

There were no cases of body vermin.

B—DEFECTIVE VISION AND SQUINT.

The work of the School Eye Clinic, Dispensary Buildings, Guestrow, Aberdeen, was carried on by ophthalmic surgeons on the staff of the North-Eastern Regional Hospital Board.

Number of cases examined—Boys, 823; girls, 892. Total, 1,715.

Spectacles were prescribed in all necessary cases.

Cases of pre-school children referred by the Maternity and Child Welfare Department numbered 52 and were mostly cases of hypermetropia with actual or apparent squint.

C—NOSE AND THROAT (OPERATIVE TREATMENT).

Cases requiring operative treatment are referred by the School Aural Surgeon either to the Royal Aberdeen Hospital for Sick Children or to the City Hospital.

D—ORTHOPÆDIC AND POSTURAL DEFECTS (SPECIALIST TREATMENT).

The Orthopædic Clinic, inaugurated under the auspices of the Cripples' Welfare Association and commenced in May, 1942, is now controlled by the North-Eastern Regional Hospital Board. It is held in Charlotte Street Clinic at intervals of approximately one month, according to the number of cases to be examined, and is conducted by one of the Orthopædic Surgeons of Aberdeen Royal Infirmary. Special remedial exercises for suitable cases are arranged to take place at least once per week at the nearest Junior Secondary School. These classes are conducted by Specialist Physical Instructors.

During the year, 104 children were examined by the Orthopædic Surgeon, and of these, 29 were referred to one or other of the General Hospitals for further investigation and treatment in hospital; special remedial exercises were recommended for 26; and no action further than the slight raising of soles and heels of shoes in some cases was considered necessary in the case of 49 children.

Advantage of the clinic has also been taken, by arrangement, by the parents of 52 children under school age.

Dental Inspection and Treatment.

Number of children who were inspected by the Dental Officers :

Age.	Systematic Examinations.
3	55
4	107
5	82
6	168
7	88
8	598
9	232
10	479
11	59
12	297
13	264
14	573
15	—
16	74
	<hr/> 3,076

Number of Dental Officers' visits to schools—37 sessions (half-days).

Of the 3,076 children seen in school, 1,998 were found to require treatment, and, of these, 1,610 or 80·6 per cent., intimated acceptance of treatment; 26 intimated that their children were being privately treated. Refusals numbered 362, this being the number of unsigned cards returned at the time of the dental inspections. During the year, fifty to sixty per cent. of these cases ask for treatment but are then classified as emergency cases.

	Systematic Cases.	Special and Emergency Cases.
Number of children treated by the School Dental Officers . . .	2,711	5,200
Number of attendances made by children for treatment . . .	5,875	7,447
Fillings—		
(a) Permanent teeth	2,580	1,299
(b) Temporary teeth	167	135
Extractions—		
(a) Permanent teeth	417	2,000
(b) Temporary teeth	1,536	7,041
Anæsthetics—		
Number of administrations of a general anæsthetic for extractions	726	4,553
Number of local anæsthetics	357	292
Other operations—		
(a) Permanent teeth	2,058	1,576
(b) Temporary teeth	460	7
Orthodontics—		
Number of regulations	29 completed	
	1 incomplete.	
Part dentures	27	
Crowns	1	

The following work was carried out at the School Dental Clinic for Oakbank Industrial School:—

Number of boys inspected	571
Number of boys treated	41
Attendances for treatment	80
Extractions—	
(a) Permanent teeth	33
(b) Temporary teeth	5
Anæsthetics—	
General	28
Local	1
Fillings—	
(a) Permanent teeth	19
(b) Temporary teeth	—
Scalings	8
Dressings	8
Gum treatment	20

The following work was performed at the School Dental Clinic in respect of expectant and nursing mothers and children of pre-school age:—

	Mothers	Children
Number of cases treated	39	785
Number of visits required	71	1,148
Extractions	116	1,472
Anæsthetics—		
General	41	687
Local	4	—
Fillings	6	188

Diphtheria Immunisation.

Details relating to the arrangements made by the Corporation for carrying out diphtheria immunisation are given in Section A6 of this Report, as also the statistics of the work carried out from 1st January to 31st December, 1950.

At the end of June, 1950, 24,397 children of school age were known to have been fully immunised against diphtheria, *i.e.*, 94·2 per cent. of the children attending Primary and Secondary Schools (including Robert Gordon's College). At the end of June, 1950, it has also to be recorded that 13,135 children had been re-inoculated at the schools.

Tables.

The following tables are submitted:—

Table I. Numbers of children examined in the several age-groups.

Table II. Return of number and percentage of individual children in each age-groups suffering from particular defects.

Table III. Classification of children examined at systematic medical examinations.

Table IV. Return of all exceptional children of school age in the area.

Table V. Average heights and weights—Years 1929-1950.

TABLE I.

Total number of children examined at—

(a) Systematic examinations.

Ordinary Schools—

Entrants	2,409
Second age-group	2,331
Third age-group	2,669
Fourth age-group	—
Secondary Schools—age-group . .	337

7,746

(b) Other examinations—

Re-inspection by Medical Officers .	6,525
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Number of individual children inspected at systematic examinations who were notified to parents as requiring treatment (excluding uncleanness and dental caries):—

Entrants . . .	242
Second age-group . .	305
Third age-group . .	299
Fourth age-group . .	—
Secondary age-group .	20
	<hr/>
	866
	<hr/>

TABLE
SYSTEMATIC

Return of number and percentage of individual children

NATURE OF DEFECT.	Total Exam- ined. All ages.	ENTRANTS.			
		Boys 1,225		Girls 1,184	
1. Clothing unsatisfactory	7,746	1	·08	3	·3
2. Footgear unsatisfactory	"	2	·2	—	—
3. Cleanliness—					
(a) Head: Nits	"	2	·2	7	·6
Vermin	"	—	—	—	—
(b) Body: Dirty	"	5	·4	1	·08
Vermin	"	—	—	—	—
4. Skin—					
(a) Head:					
Ringworm	"	—	—	—	—
Impetigo	"	9	·7	3	·3
Other Diseases	"	—	—	—	—
(b) Body:					
Ringworm	"	1	·08	—	—
Impetigo	"	—	—	—	—
Scabies	"	1	·08	—	—
Other Diseases	"	20	1·6	23	1·9
5. Nutritional state—					
Slightly defective	"	1	·08	4	·3
Bad	"	—	—	—	—
6. Mouth and Teeth Unhealthy	"	14	1·1	21	1·8
7. Naso-Pharynx—					
(a) Nose:					
(i) Obstruction requiring observation	"	111	9·1	80	6·8
(ii) Obstruction requiring Operative Treatment	"	5	·4	9	·8
(iii) Other Conditions	"	—	—	3	·3
(b) Throat:					
(i) Tonsils requiring observation	"	439	35·8	407	34·4
(ii) Tonsils requiring Operative Treatment	"	35	2·9	37	3·1
(c) Glands:					
(i) Requiring observation	"	55	4·5	34	2·9
(ii) Requiring Operative Treatment	"	1	·08	1	·08
8. Eyes—					
(a) External Diseases:					
Blepharitis	"	2	·2	6	·5
Conjunctivitis	"	2	·2	—	—
Corneal Opacities	"	—	—	1	·08
Squint	"	112	9·1	104	8·8
Other Diseases	"	3	·2	10	·8
(b) Visual Acuity (Snellen):					
Defective—Fair	5,337	—	—	—	—
Bad	"	—	—	—	—
Recommended for Refraction	"	53	4·3	49	4·1
Number wearing Glasses	7,746	26	2·1	26	2·2
9. Ears					
(a) Diseases;					
Otorrhea	"	16	1·3	13	1·1
Other Diseases	"	9	·7	9	·8

II.

EXAMINATIONS.

in each age-group suffering from particular defects.

SECOND AGE-GROUP.				THIRD AGE-GROUP.				FOURTH AGE-GROUP.				ALL AGES.			
Boys 1,213		Girls 1,118		Boys 1,311		Girls 1,358		Boys 188		Girls 149		Boys 3,937		Girls 3,809	
3	·2	2	·2	1	·08	1	·07	—	—	—	—	5	·1	6	·2
5	·4	1	·09	3	·2	—	—	—	—	—	—	10	·3	1	·03
7	·6	12	1·1	3	2	22	1·6	—	—	—	—	12	·3	41	1·1
—	—	—	—	—	—	1	·07	—	—	—	—	—	—	1	·03
2	·2	1	·09	2	·2	6	·4	—	—	—	—	9	·2	8	·2
—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	1	·07	—	—	—	—	—	—	1	·03
5	·4	7	·6	2	·2	4	·3	—	—	—	—	16	·4	14	·4
1	·08	2	·2	2	·2	5	·4	1	·5	—	—	4	·1	7	·2
—	—	—	—	1	·08	—	—	—	—	—	—	2	·05	—	—
—	—	—	—	1	·08	—	—	—	—	—	—	1	·03	—	—
1	·08	1	·09	—	—	—	—	—	—	—	—	2	·05	1	·03
24	2·0	23	2·1	38	2·9	54	4·0	4	2·1	6	4·0	86	2·2	106	2·8
4	·3	9	·8	2	·2	6	·4	—	—	—	—	7	·2	19	·5
—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15	1·2	11	1·0	11	·8	11	·8	—	—	—	—	40	1·0	43	1·1
126	10·4	67	6·0	124	9·5	86	6·3	2	1·1	5	3·4	363	9·2	238	6·2
6	·5	6	·5	2	·2	1	·07	—	—	—	—	13	·3	16	·4
4	·3	3	·3	1	·08	2	·1	—	—	—	—	5	·1	8	·2
183	15 1	227	20·3	167	12·7	200	14·7	1	·5	8	5·4	790	20·1	842	22·1
11	·9	13	1·2	7	·5	8	·6	—	—	—	—	53	1·3	58	1·5
43	3·5	22	2·0	9	·7	17	1·3	2	1·1	1	·7	109	2 8	74	1·9
—	—	—	—	—	—	—	—	—	—	—	—	1	·03	1	·03
21	1·7	21	1·9	21	1·6	25	1 8	—	—	1	·7	44	1·1	53	1·4
—	—	1	·09	2	·2	—	—	—	—	—	—	4	·1	1	·03
—	—	2	·2	1	·08	—	—	—	—	—	—	1	·03	3	·08
43	3·5	44	3·9	36	2·7	49	3·6	2	1·1	2	1·3	193	4 9	199	5 2
7	·6	11	1·0	11	·8	25	1·8	—	—	—	—	21	·5	46	1 2
228	18 8	245	21·9	222	16·9	316	23·3	39	20·7	38	25·5	489	18·0	599	22·8
17	1·4	26	2·3	18	1·4	34	2·5	—	—	1	·7	35	1 3	61	2 3
64	5·3	93	8·3	83	6·3	90	6·6	9	4·8	9	6·0	156	5·8	192	7·3
111	9·2	110	9·8	91	6·9	167	12·3	28	14·9	23	15·4	256	6 5	326	8·6
10	·8	10	·9	11	·8	14	1·0	2	1·1	1	·7	39	1·0	38	1·0
6	·5	7	·6	8	·6	3	·2	2	1·1	—	—	25	·6	19	·5

TABLE
SYSTEMATIC

Return of number and percentage of individual children

NATURE OF DEFECT.	Total exam- ined. All ages.	ENTRANTS.			
		Boys 1,225		Girls 1,184	
9. Ears—(Continued)—					
(b) Defective Hearing :					
Grade I	5,337	1	·08	2	·2
Grade IIA	„	—	—	—	—
Grade IIB	„	—	—	—	—
Grade III	„	—	—	—	—
10. Speech—					
Defective articulation	7,746	13	1·1	3	·3
Stammering	„	4	·3	—	—
11. Mental and Nervous Condition—					
(a) Backward	„	1	·08	—	—
(b) Dull	„	—	—	—	—
(c) Mentally deficient (Educable)	„	—	—	—	—
(d) Mentally deficient (Ineducable)	„	—	—	1	·08
(e) Highly nervous or unstable	„	3	·2	2	·2
(f) Difficult in behaviour	„	—	—	—	—
12. Circulatory System—					
(a) Organic heart disease :					
(i) Congenital	„	2	·2	3	·3
(ii) Acquired	„	—	—	1	·08
(b) Functional conditions	„	2	·2	4	·3
13. Lungs—					
Chronic bronchitis	„	1	·08	—	—
Suspected tuberculosis	„	7	·6	2	·2
Other diseases	„	40	3·3	44	3·7
14. Deformities—					
(a) Congenital	„	4	·3	2	·2
(b) Acquired (Infantile paralysis)	„	2	·2	1	·08
(c) Acquired (Probably rickets)	„	24	2·0	25	2·1
(d) Acquired (Other causes)	„	29	2·4	22	1·9
15. Infectious disease	„	4	·3	5	·4
16. Other diseases or defects	„	91	7·4	125	10·6
17. Classification :					
Group I	„	425	34·7	436	36·8
Group IIA	5,337	—	—	—	—
Group IIB	7,746	1	·08	7	·6
Group IIC	5,337	—	—	—	—
Group III	7,746	705	57·6	638	53·9
Group IVA	„	69	5·6	79	6·7
Group IVB	„	25	2·0	24	2·0
Number Notified to parents	„	122	10·0	120	10·1
Number under observation	„	680	55·5	604	51·0
Number of Parents present	„	1,171	95·6	1,120	94·6

II (Continued.)

EXAMINATIONS.

in each age-group suffering from particular defects.

SECOND AGE-GROUP.				THIRD AGE-GROUP.				FOURTH AGE-GROUP.				ALL AGES.			
Boys 1,213		Girls 1,118		Boys 1,311		Girls 1,358		Boys 188		Girls 149		Boys 3,937		Girls 3,809	
—	—	1	·09	1	·08	2	·1	1	·5	1	·7	2	·07	4	·2
—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3	·2	3	·3	—	—	—	—	—	—	—	—	16	·4	6	·2
3	·2	1	·09	11	·8	1	·07	2	1·1	1	·7	20	·5	3	·08
1	·08	1	·09	—	—	—	—	—	—	—	—	2	·05	1	·03
1	·08	—	—	—	—	1	·07	—	—	—	—	1	·03	1	·03
1	·08	—	—	—	—	—	—	—	—	—	—	1	·03	—	—
6	·5	1	·09	1	·08	1	·07	—	—	—	—	10	·3	4	·03
2	·2	1	·09	—	—	—	—	—	—	—	—	2	·05	1	·03
—	—	1	·09	—	—	2	·1	—	—	—	—	2	·05	6	·2
1	·08	2	·2	2	·2	3	·2	2	1·1	1	·7	5	·1	7	·2
1	·08	2	·2	4	·3	9	·7	—	—	—	—	7	·2	15	·4
1	·08	—	—	1	·08	—	—	1	·5	—	—	4	·1	—	—
3	·2	3	·3	5	·4	5	·4	—	—	—	—	15	·4	10	·3
36	3·0	17	1·5	38	2·9	21	1·5	2	1·1	3	2·0	116	2·9	85	2·2
7	·6	1	·09	4	·3	5	·4	—	—	—	—	15	·4	8	·2
2	·2	1	·09	2	·2	2	·1	1	·5	1	·7	7	·2	5	·1
19	1·6	16	1·4	19	1·4	18	1·3	—	—	—	—	62	1·6	59	1·5
40	3·3	21	1·9	51	3·9	37	2·7	5	2·7	2	1·3	125	3·2	82	2·2
1	·08	—	—	1	·08	—	—	—	—	—	—	6	·2	5	·1
131	10·8	132	11·8	120	9·2	169	12·4	4	2·1	5	3·4	346	8·8	431	11·3
471	38·8	411	36·8	610	46·5	514	37·8	120	63·8	87	58·4	1,626	41·3	1,448	38·0
145	12·0	164	14·7	130	9·9	203	14·9	39	20·7	29	19·5	314	11·6	396	15·1
2	·2	3	·3	1	·08	5	·4	—	—	—	—	4	·1	15	·4
—	—	2	·2	—	—	1	·07	—	—	—	—	—	—	3	·1
441	36·4	399	35·7	381	29·1	392	28·9	21	11·2	22	14·8	1,548	39·3	1,451	38·1
120	9·9	115	10·3	142	10·8	185	13·6	4	2·1	6	4·0	335	8·5	385	10·0
34	2·8	24	2·1	47	3·6	58	4·3	4	2·1	5	3·4	110	2·8	111	2·9
150	12·4	155	13·9	140	10·7	159	11·7	10	5·3	10	6·7	422	10·7	444	11·7
499	41·1	458	41·0	494	37·7	567	41·8	25	13·3	33	22·1	1,698	43·1	1,662	43·6
1,069	88·1	1,005	89·9	785	59·9	988	72·8	35	18·6	40	26·8	3,060	77·7	3,153	82·8

TABLE III.

SYSTEMATIC MEDICAL EXAMINATIONS.

CLASSIFICATION	ENTRANTS		SECOND AGE-GROUP		THIRD AGE-GROUP		FOURTH AGE-GROUP		TOTAL	
	No. of Children	Percentage of the Children examined in this Group	No. of Children	Percentage of the Children examined in this Group	No. of Children	Percentage of the Children examined in this Group	No. of Children	Percentage of the Children examined in this Group	No. of Children	Percentage of the children examined at systematic examinations
I. Children free from defects	861	35.7	882	37.8	1,124	42.1	207	61.4	3,074	39.7
II. Children (otherwise free from defects) who suffer from—										
(a) Defective vision not worse than 6/12 in the better eye with or without glasses	—	—	309	13.3	333	12.5	68	20.2	710	9.2
(b) Conditions of the mouth and teeth requiring treatment	8	0.3	5	0.2	6	0.2	—	—	19	0.2
(c) Both (a) and (b)	—	—	2	0.1	1	0.03	—	—	3	0.04
Total	8	0.3	316	13.6	340	12.7	68	20.2	732	9.5
III. Children suffering from ailments (other than those mentioned in II.) from which complete recovery is anticipated within a few weeks	1,343	55.7	840	36.0	773	29.0	43	12.8	2,999	38.7
IV. Children suffering from (or suspected to be suffering from) defect less remediable than defects specified in II. or III., distinguishing cases—										
(a) Where complete cure or restoration of function (in the case of eye defect, full correction) is considered possible	148	6.1	235	10.1	327	12.3	10	3.0	720	9.3
(b) Where improvement only is considered possible, <i>i.e.</i> , without complete restoration of function	49	2.1	58	2.5	105	3.9	9	2.7	221	2.9
Total	197	8.2	293	12.6	432	16.2	19	5.7	941	12.1
Total number of children examined	2,409	100%	2,331	100%	2,669	100%	337	100%	7,746	100%

TABLE IV.

RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.

DISABILITY	At Ordinary Schools	At Special Schools or Classes	At no School or Institution	TOTAL
1. Blind	—	1	—	1
2. Partially sighted—				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	—	10	—	10
(b) Other conditions of the eye, <i>e.g.</i> , cataract, ulceration, &c., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	—	2	—	2
3. Deaf—				
Grade I	24	—	—	24
Grade II _A	—	—	—	—
Grade II _B	2	11	—	13
Grade III	—	47	—	47
4. Defective Speech—				
(a) Defects of articulation requiring special educational measures	360	—	—	360
(b) Stammering requiring special educational measures	126	6	—	132
5. Mentally defective children (between 5 and 16 years)—				
(a) Educable (I. Q. approx. 50-70)	—	201	—	201
(b) Ineducable (I. Q. generally less than 50)	—	2	23	25
6. Epilepsy—				
(a) Mild and occasional	8	7	—	15
(b) Severe (suitable for care in a residential school)	—	6	—	6
7. Physically defective children (between 5 and 16 years)—				
(a) Non-pulmonary tuberculosis (excluding cervical glands)	13	4	11	28
(b) General orthopaedic conditions	242	24	—	266
(c) Organic Heart Disease	65	4	—	69
(d) Other causes of ill-health	—	6	—	6
8. Multiple defects—				
(a) Mentally defective and deaf	—	2	—	2
(b) Physically defective and mentally defective	—	6	—	6
(c) Mentally defective (ineducable) and blind	—	—	2	2

TABLE V.—HEIGHTS AND WEIGHTS, 1929-1950.
Boys.

Year	GROUP I.—5 YEARS				GROUP II.—9 YEARS				GROUP III.—13 YEARS				GROUP IV.—16 YEARS			
	Average Age	Average Height in Inches	Average Weight in Lbs.	Yrs. Mths.	Average Age	Average Height in Inches	Average Weight in Lbs.	Yrs. Mths.	Average Age	Average Height in Inches	Average Weight in Lbs.	Yrs. Mths.	Average Age	Average Height in Inches	Average Weight in Lbs.	Yrs. Mths.
1929-30	5 3	41.4	40.0	...	...	...	..	13 2	57.1	83.3	66.3	16 3	127.5	66.3	127.5	16 3
1930-31	5 3	41.5	40.3	...	...	...	..	...	...	...	66.2	16 3	127.0	66.2	127.0	16 3
1931-32	5 3	41.5	40.1	9 0	49.7	58.7	58.7	...	...	...	65.6	16 1	127.3	65.6	127.3	16 1
1932-33	5 3	41.6	40.1	9 0	49.6	58.1	58.1	...	...	...	66.2	16 1	128.4	66.2	128.4	16 1
1933-34	5 3	41.5	40.3	9 0	49.7	58.6	58.6	...	...	...	65.7	16 0	123.9	65.7	123.9	16 0
1934-35	5 3	41.6	40.2	9 0	49.7	58.0	58.0	...	...	...	66.4	16 1	128.7	66.4	128.7	16 1
1935-36	5 3	41.9	40.4	9 0	49.9	58.6	58.6	...	...	...	66.2	16 0	125.1	66.2	125.1	16 0
1936-37	5 3	41.8	40.4	9 0	50.0	58.8	58.8	...	...	...	65.4	16 0	126.7	65.4	126.7	16 0
1937-38	5 3	41.8	40.7	9 0	50.3	59.6	59.6	...	...	...	66.7	16 0	129.6	66.7	129.6	16 0
1938-39	5 3	42.0	41.0	9 6	51.3	60.9	60.9	13 6	58.6	90.9	67.7	16 5	135.0	67.7	135.0	16 5
1939-40	5 4	42.3	41.6	9 6	50.9	61.3	61.3	13 6	58.5	89.8	67.0	16 6	134.1	67.0	134.1	16 6
1940-41	5 3	41.9	41.3	9 4	50.7	60.8	60.8	13 5	58.4	88.2	67.1	16 4	132.0	67.1	132.0	16 4
1941-42	5 4	42.0	41.4	9 4	50.8	61.1	61.1	13 4	58.3	88.3	67.4	16 5	133.2	67.4	133.2	16 5
1942-43	5 3	42.0	41.2	9 4	50.8	60.8	60.8	13 4	58.5	88.8	67.5	16 5	134.0	67.5	134.0	16 5
1943-44	5 3	42.0	41.8	9 5	50.9	62.0	62.0	13 5	58.6	89.4	67.4	16 7	134.7	67.4	134.7	16 7
1944-45	5 3	42.2	42.0	9 4	51.0	61.8	61.8	13 4	58.4	89.4	67.5	16 4	133.5	67.5	133.5	16 4
1945-46	5 3	42.4	42.1	9 5	51.0	62.2	62.2	13 5	58.7	90.1	67.5	16 6	134.3	67.5	134.3	16 6
1946-47	5 2	42.3	41.7	9 2	51.1	62.0	62.0	13 5	58.7	90.4	67.6	16 6	130.0	67.6	130.0	16 6
1947-48	5 2	42.3	41.8	9 5	51.1	62.4	62.4	13 4	58.7	90.6	67.5	16 6	134.5	67.5	134.5	16 6
1948-49	5 3	42.4	42.4	9 5	51.3	63.3	63.3	13 5	58.8	91.4	67.7	16 6	134.3	67.7	134.3	16 6
1949-50	5 3	42.8	42.8	9 5	51.6	63.6	63.6	13 5	59.0	91.6	67.6	16 6	135.3	67.6	135.3	16 6

TABLE V.—HEIGHTS AND WEIGHTS, 1929-1950—continued.

Girls.

Year	GROUP I.—5 YEARS				GROUP II.—9 YEARS				GROUP III.—13 YEARS				GROUP IV.—16 YEARS			
	Average Age		Average Height in Inches		Average Age		Average Height in Inches		Average Age		Average Height in Inches		Average Age		Average Height in Inches	
	Yrs.	Mths.	Yrs.	Mths.	Yrs.	Mths.	Yrs.	Mths.	Yrs.	Mths.	Yrs.	Mths.	Yrs.	Mths.	Yrs.	Mths.
1929-30	5	3	41.1	38.5	...	...	...	...	13	3	58.0	85.9	16	3	62.6	115.8
1930-31	5	3	41.2	38.5	...	...	...	...	...	...	...	...	16	3	62.7	114.4
1931-32	5	3	41.0	38.3	9	0	49.1	55.4	...	...	...	...	16	1	62.3	116.1
1932-33	5	3	41.2	38.5	9	1	49.2	55.9	...	...	...	...	16	1	63.0	119.0
1933-34	5	3	41.2	38.8	9	0	49.7	56.6	...	...	...	...	16	1	62.7	115.4
1934-35	5	3	41.4	38.9	9	0	49.6	55.9	...	...	...	...	16	0	63.1	118.8
1935-36	5	3	41.3	38.5	9	0	49.6	55.9	...	...	...	...	16	0	63.6	118.8
1936-37	5	3	41.4	38.7	9	0	49.6	56.1	...	...	...	...	16	0	63.1	119.2
1937-38	5	3	41.7	39.1	9	0	50.1	56.8	...	...	...	...	16	0	63.8	120.7
1938-39	5	3	41.7	39.3	9	7	51.1	60.5	13	6	59.6	94.4	16	4	63.6	120.2
1939-40	5	4	41.9	40.0	9	6	50.4	59.3	13	5	58.9	92.7	...	...	...	...
1940-41	5	3	41.7	39.7	9	4	50.2	58.5	13	5	59.0	91.6	16	6	63.6	120.5
1941-42	5	3	41.6	39.8	9	4	50.3	58.6	13	4	58.8	92.0	16	5	64.0	122.3
1942-43	5	3	41.8	40.0	9	4	50.4	58.2	13	4	59.3	92.2	16	6	63.9	120.6
1943-44	5	3	41.6	39.9	9	5	50.4	59.4	13	5	59.3	93.4	16	7	64.4	124.8
1944-45	5	3	41.9	40.1	9	5	50.3	60.5	13	5	59.3	93.4	16	6	63.6	123.8
1945-46	5	3	41.7	40.3	9	6	50.6	60.4	13	5	59.4	94.9	16	6	63.1	121.7
1946-47	5	2	42.7	40.2	9	5	50.7	60.3	13	4	59.3	92.6	16	6	64.2	124.2
1947-48	5	2	42.0	41.2	9	5	50.8	60.6	13	5	59.4	94.8	16	5	63.8	123.2
1948-49	5	3	42.4	41.1	9	5	50.9	61.5	13	5	59.6	96.5	16	5	64.0	123.9
1949-50	5	3	42.1	40.7	9	5	51.0	61.3	13	6	59.6	95.9	16	6	63.9	120.9

C.—PORT HEALTH ADMINISTRATION.

Medical Inspection of Shipping.

Under the Port Sanitary Regulations of 1933 and 1945, in relation to vessels arriving from foreign ports, the usual Declarations of Health were received.

Three seamen—two suffering from dysentery and one from measles—were treated in the City (Fever) Hospital.

The work carried out by the Sanitary Staff in accordance with the Council's Scheme of Port Sanitary Administration is given in the Annual Report of the Chief Sanitary Inspector.

D.—FOOD SUPPLY.

(1) *Milk.*

The administration of the Acts, Orders, and Bye-laws relating to milk is dealt with in detail in the 1950 Annual Report of the Chief Sanitary Inspector.

(2) *Ice-Cream.*

The administration of the Ice-Cream (Scotland) Regulations, 1948, is also dealt with in the Annual Report of the Chief Sanitary Inspector.

(3) *Meat and other Foods.*

Of the four private slaughter-houses licensed within the Burgh, two belong to the Flesher Incorporation. The only slaughter-house in operation during 1950 was Hutcheon Street Slaughter-house, which belongs to the above-mentioned Incorporation.

The following is a summary of the animals slaughtered and the results of the inspection of the carcasses:—

Class of Animal.	Total Slaughtered.	Carcases Totally Condemned.	Carcases Partially Condemned.	Weight (in lbs.) of Condemned Meat and Offal.
Cattle . . .	44,223	768	585	594,315
Sheep . . .	139,238	249	164	47,459
Pigs . . .	457	52	26	11,012
Calves . . .	3,348	97	6	5,926
	<hr/> 187,271	<hr/> 1,166	<hr/> 781	<hr/> 658,712

In addition, 690 lots of organs or offal were condemned, weighing 213,729 lbs., so that the total weight of condemned meat and offal amounted to 872,441 lbs.

Slaughter of Animals (Scotland) Act, 1928.—There was one prosecution during the year and a fine of 40s. was imposed.

During the year 54 licences were issued for the use of the mechanically-operated instrument for the slaughter of animals.

Diseases of Animals Acts.—The routine work necessary under the various Acts and Orders was duly carried out.

During 1950 no outbreaks of contagious diseases occurred.

E.—MISCELLANEOUS.

(1) *National Assistance Act, 1948.*

Under the provisions of the above Act, local authorities are required to provide moderately-sized establishments for the accommodation of those aged and infirm persons within their area who cannot be adequately looked after either in their own homes or by relatives. In 1950, the Corporation acquired Balnagask House and Estate, and Balnagask House, after being reconditioned, was set aside for the accommodation of old persons. This home, which has accommodation for 22 old persons, was formally opened on 6th December, 1950. The home is fully occupied, the majority of the occupants having been transferred from Woodend Home. The environment of the home is very attractive, and at the end of the year all the persons resident in the home expressed themselves as being happy in their new surroundings.

Towards the end of the year, negotiations were proceeding with a view to purchasing a house at 3, Ferryhill Place, for the accommodation of aged persons.

The whole essence of residential accommodation for the aged involves the breaking down of the poor law system where the aged were congregated together in large numbers. For economic working, the ideal accommodation is for 25 to 35 persons; perhaps the latter number is on the large side. The main functions of these homes is to make the old people comfortable and re-habilitate them where possible, and to make them feel that they are real worth-while members of the community.

The Local Authority have entered into an agreement with the Old People's Welfare Council, a voluntary organisation which has acquired a group of four large houses in the City for the reception of aged persons. By this agreement, the Local Authority meet a proportion of the cost of the maintenance of those cases who are admitted to the Welfare Council's Homes, due regard being had to the financial circumstances of each individual case. Arrangements have also been made with the Church of Scotland Committee on Social Service for the reception of aged persons from the City into Balmedie Home.

At the end of the year negotiations were in progress for the purchase by the North-Eastern Regional Hospital Board of Woodend Home, which could accommodate a considerable number of chronic sick persons.

Registration and Inspection of Disabled or Old Persons' Homes.

The registration and inspection of homes for disabled and old persons came into operation through the National Assistance (Registration of Homes) (Scotland) Regulations 1949. The date on which the regulations came into effect was 1st November, 1949, and, during 1950, seven homes were registered with the Local Authority.

Removals.

In Section 47 of the National Assistance Act power is given to the Local Authority to remove to suitable premises any person suffering from grave chronic

disease, or any person who is aged and infirm and is living in insanitary conditions, provided that such persons are unable to look after themselves and cannot get anyone to look after them efficiently. During the year under review there were four cases within this category, but the powers of the Section were not required as, through suasion, the persons involved went voluntarily to an institution.

Care of Property.

Another important Section of the National Assistance Act is that which gives power to the Local Authority to provide for the care and protection of property when the owners are admitted to hospital. During the year there were 353 such cases. This action of the Local Authority relieves the minds of the patients when they are in hospital, as they know that their goods and chattels are being safeguarded.

Burials or Cremations.

Burials were carried out by the Corporation in respect of 48 deceased persons who had no near relatives willing or able to bury them. Where death grant was applicable, financial recovery was obtained from the Ministry of National Insurance.

Welfare Services.

The number of blind persons on the Register of the Blind as at 31st December, 1950, was 307. The numbers according to different age groups are given in the subjoined table:—

0-2		3-4		5-15		16-17		18-29		30-39		40-49		50-69		70+		TOTAL		
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.
—	—	—	—	3	1	1	—	8	5	16	9	16	26	65	58	36	63	145	162	307

During 1950, 32 persons were examined for the first time, 21 at the Regional Blind Persons' Clinic and 11 at their homes. In addition, 9 persons underwent re-examination. The total number of persons examined was 41, as compared with 46 in 1949.

Of the 32 applicants examined for the first time, 18 (or 56 per cent.) were certified blind within the meaning of the Blind Persons Act.

As regards the employment of blind persons of 16 years and upwards, the numbers employed as at 31st December, 1950, were as under:—

	Males.	Females.
(a) In Institutions for the Blind—		
Undergoing industrial training	9	2
Undergoing secondary or professional education	—	—
In workshops	38	11
(b) Outwith Institutions for the Blind	*12	1

*Including 6 home workers.

(2) *The Nursing Homes Registration (Scotland) Act.*

Under the above Act no applications were made during the year.

(3) *Health Education.*

The Scottish Council for Health Education, which was inaugurated in 1943, continues to do much good work. The Council deals with the prevention of disease and the methods whereby positive health may be secured and maintained.

The medical advisers employed by the Council give lectures on a variety of subjects, and generally illustrate these lectures by interesting films dealing with health matters.

During the months of March and April the Corporation and the Scottish Council for Health Education conducted a campaign for increased cleanliness in the handling of food. The campaign was opened in the Cowdray Hall on Monday, 6th March, at a special meeting for employers and managers in the food-handling trades. This meeting was addressed by Dr. A. G. Mearns, Medical Adviser to the Scottish Council for Health Education, and his talk was illustrated by films. Thereafter, sectional meetings were held for employees engaged in the several food-handling trades, such as bakers, dairymen, catering trade employees, ice-cream vendors, butchers, and those employed in restaurants, hotels, and public-houses. Considering that these meetings were held during the day, they were comparatively well attended. The sanitary inspectors have found that the advice given by Dr. Mearns has been put into practice.

In addition to the foregoing, lectures were given at Child Welfare Centres by members of the medical staff and by the Superintending Nursing Officer. Pamphlets and films were supplied by the Scottish Council for Health Education.

F.—STATISTICAL COMMENTARY.

POPULATION.

The population of the City has been estimated by the Registrar-General to the middle of 1950 as 187,961, compared with 189,314 in 1949.

BIRTHS.

Live-Births.—The total number of live births during the year 1950, corrected for “transfers” was 3,226 (3,054 legitimate and 172 illegitimate). This gives a rate of 17·2 per 1,000 of population, as against 17·5 in 1949.

The following table shows the rates for Aberdeen and for all Scotland for the years 1945 to 1950:—

Year	Live Births. Rate per 1,000 of Population.	
	Aberdeen	All Scotland
1950	17·2	17·9
1949	17·5	18·5
1948	19·1	19·4
1947	22·0	22·0
1946	20·4	20·3
1945	15·5	16·9
Mean of 1945-1949	18·9	19·4

In 1950 the birth rates in the other principal cities were—Glasgow, 18·4; Edinburgh, 15·7; and Dundee, 17·8.

The natural increase for the year, *i.e.*, the excess of births over deaths, was 960, as compared with 1,093 in 1949, and 1,500 in 1948. In 1938 the excess was 872.

Masculinity of Live-Births.—This term indicates the proportion of male births to female births in any year. Of the total 3,226 live births in 1950, 1,664 were males and 1,562 were females, giving a proportion of 107 males to 100 females as compared with 105 in 1949.

Illegitimate Live-Births.—In 1950 the number of illegitimate births was 172, representing 5·3 per cent. of the total births. For all Scotland the rate was 5·2 per cent.

Still-Births.—The number of still-births, after correction for “transfers,” was 74, giving a rate of 22 per 1,000 total births as compared with a rate of 19 in 1949. For all Scotland the rate in 1950 was 27 per 1,000 total births.

MARRIAGES.

During 1950 there were 1,853 marriages within the City. This is equivalent to a rate of 9·9 per 1,000 of population. For comparative purposes the following Table is submitted:—

Year	Number	Rate per 1,000 of Population
1950	1,853	9·9
1949	1,841	9·7
1948	2,104	11·1
1947	2,091	11·1
1946	2,186	11·9
1945	2,286	12·5
Mean of 1945-1949 .	2,102	11·3

DEATHS.

The total number of deaths and the death-rate per 1,000 of the population, as also the average age at death, for each of the years 1945-1950 are given in the following Table:—

Year	Number	Rate per 1,000 of Population	Average Age at Death
1950	2,266	12·1	64·9
1949	2,213	11·7	64·1
1948	2,098	11·1	61·7
1947	2,242	11·9	57·3
1946	2,124	12·0	60·3
1945	2,084	12·8	59·6
Mean of 1945-1949 .	2,152	11·9	60·6

There were 2,266 deaths in 1950 as compared with 2,213 in 1949. The death-rate was 12·1 in 1950 as compared with 11·7 in 1949. For all Scotland the death-rate in 1950 was 12·4 and in 1949, 12·3.

The average age at death of all persons dying during 1950 was 64·9 years, being the highest average age at death on record. In the quinquennial period, 1891-1895, the average age at death was 32·9 years.

An analysis of the deaths at the various age-periods shows that, of the 2,266 deaths in 1950, 847 (or fully one-third of the total deaths) occurred in ages 75 years and over.

CAUSES OF DEATH.

Table II gives the death-rate from each of the principal infectious diseases and from selected causes since the commencement of registration of deaths in 1856. The rates in 1950 are based on the classification of causes of death in accordance with the "Sixth Revision of the International Lists of Diseases and Causes of Death" and, in some instances, the rates are not strictly comparable with preceding years. The causes of death in 1950 at the various age-periods are classified in Table III.

TABLE I.—ABERDEEN.—MARRIAGE, BIRTH, AND DEATH RATE—1856 TO 1950.
Per 1,000 of population.

Year	Population†	Marriages		Live Births *			Deaths *			Excess of Births over Deaths	Infantile Mortality Deaths of Infants under 1 year per 1,000 Births
		Number	Rate per 1,000 of Population	Number	Rate per 1,000 of Population	Illegit Births per 100 Total Births	Number	Rate per 1,000 of Population	Average Age at Death		
1950	187,961	1,853	9·9	3,226	17·2	5·3	2,266	12·1	64·9	960	29
1949	189,314	1,841	9·7	3,306	17·5	5·7	2,213	11·7	64·1	1,093	30
1948	188,853	2,104	11·1	3,598	19·1	5·9	2,098	11·1	61·7	1,500	34
1947	187,751	2,091	11·1	4,124	22·0	5·9	2,242	11·9	57·3	1,882	64
1946	176,939	2,186	11·9	3,762	20·4	7·0	2,124	12·0	60·3	1,638	42
1945	163,108	2,286	12·5	2,830	15·5	10·0	2,084	12·8	59·6	746	54
Mean of 1945-1949	†	2,102	11·3	3,524	18·9	6·9	2,152	11·9	60·6	1,372	45
1944	159,263	1,646	9·1	2,989	16·5	9·2	2,056	12·9	58·4	933	57
1943	159,162	1,700	9·5	2,876	16·0	8·9	2,239	14·1	57·5	637	68
1942	164,100	2,034	11·3	2,904	16·1	8·5	2,224	13·6	57·9	680	67
1941	167,800	2,055	11·4	2,907	16·2	7·5	2,257	13·5	56·2	650	77
1940	172,310	2,370	13·2	2,804	15·6	6·3	2,457	14·3	55·8	347	86
Mean of 1940-44	†164,527	1,961	10·9	2,896	16·1	8·1	2,247	13·7	57·0	649	71
1936-1940	†	1,962	11·0	2,973	16·7	6·2	2,243	12·7	55·4	730	72
1931-1935	171,959	1,590	9·2	3,133	18·2	7·1	2,284	13·3	52·1	849	86
1926-1930	165,956	1,510	9·1	3,263	19·7	8·2	2,207	13·3	49·1	1,056	94
1921-1925	161,622	1,582	9·8	3,763	23·3	8·2	2,303	14·3	44·4	1,460	115
1916-1920	161,568	1,754	10·9	3,479	21·5	10·6	2,439	15·1	41·7	1,040	127
1911-1915	164,324	1,489	9·1	3,959	24·1	10·2	2,752	16·8	38·1	1,207	143
1906-1910	163,620	1,360	8·3	4,505	27·5	9·7	2,512	15·4	37·6	1,993	128
1901-1905	158,082	1,428	9·0	4,872	30·8	8·5	2,763	17·5	34·9	2,109	143
1896-1900	145,740	1,356	9·3	4,636	31·8	8·3	2,644	18·1	33·3	1,992	144
1891-1895	131,627	1,099	8·4	4,114	31·3	9·8	2,539	19·3	32·9	1,575	147
1886-1890	117,587	911	7·8	3,827	32·5	10·4	2,370	20·2	...	1,457	140
1881-1885	108,959	848	7·8	3,712	34·1	10·6	2,159	19·8	...	1,553	126
1876-1880	100,419	788	7·9	3,480	34·7	10·9	2,100	20·9	...	1,380	129
1871-1875	91,941	705	7·7	3,169	34·5	12·1	2,063	22·4	...	1,106	133
1866-1870	84,234	684	8·1	3,010	35·7	12·9	1,978	23·5	...	1,032	133
1861-1865	77,040	624	8·1	2,663	34·6	...	1,915	24·9	...	748	130
1856-1860	73,458	524	7·1	2,397	32·6	...	1,772	24·1	...	625	126

* Corrected for transferred births for 1911 and for transferred deaths for 1904 and subsequent years.

† Civilian Population from 1940 to 1946 inclusive used for death-rate only.

TABLE II.—ABERDEEN.—DEATHS AT ALL AGES FROM SELECTED CAUSES.
(per 100,000 of population),—*Years* 1856-1950.*

Year.	Smallpox.	Scarlet Fever.	Diphtheria and Croup.	Measles.	Whooping Cough.	Influenza.	Typhus Fever.	Typhoid and Paratyphoid Fever.	Tuberc. Dis.		Dis. of Digestive System (inc. Diarrhea).	Cancer and other Malignant Diseases.	Bronchitis.	Pneumonia.	Diseases of the Circulatory System.
									Respiratory.	Other Tuberculosis.					
1950 . . .	0	0	0.5	0.5	0	7	0	0	20	3	44	208	45	56	434
1949 . . .	0	0	0	0.5	0	5	0	0	32	3	44	182	43	58	414
1948 . . .	0	0.5	0	0.5	1	2	0	0	33	4	58	169	23	45	361
1947 . . .	0	0	0	2	3	1	0	0.5	35	6	90	177	38	59	402
1946 . . .	0	0	0	0	2	5	0	0	40	7	65	175	36	52	390
1945 . . .	0	0	6	2	2	4	0	0	43	9	64	177	35	44	383
Mean of 1945-49 .	0	0.1	1	1	2	3	0	0	37	6	64	176	35	52	390
1944 . . .	0	1	3	0	2	4	0	0	48	21	58	167	39	47	387
1943 . . .	0	1	3	1	2	28	0	0	46	17	78	189	48	57	386
1942 . . .	0	0	9	2	3	2	0	0	46	19	79	187	40	49	367
1941 . . .	0	0	11	2	4	8	0	1	48	13	65	169	46	64	362
1940 . . .	0	1	12	6	6	16	0	0	50	11	73	164	73	85	379
Mean of 1940-44 .	0	1	8	2	3	12	0	0.2	48	16	72	175	49	60	376
Mean of 1936-40 .	0	1	11	4	7	15	0	1	41	11	69	160	50	73	331
„ „ 1931-35 .	0	5	9	9	12	18	0	1	52	17	70	159	60	102	276
„ „ 1926-30 .	0.2	2	10	11	11	21	0	0.2	62	30	78	145	61	100	240
„ „ 1921-25 .	0	5	11	33	29	27	0	1	88	31	80	140	80	92	195
„ „ 1916-20 .	0	6	16	22	23	73	0	3	106	43	87	121	99	122	178
„ „ 1911-15 .	0.2	38	42	56	32	16	0	4	111	49	124	116	101	128	184
„ „ 1906-10 .	0	6	15	26	42	20	0	2	116	61	115	103	105	116	180
„ „ 1901-05 .	0.1	8	9	41	47	20	3	4	138	69	162	87	145	125	179
„ „ 1896-1900 .	0	23	18	35	53	29	0	9	167	70	210	87	172	109	167
„ „ 1891-95 .	0.4	21	22	63	52	56	1	10	181	72	190	81	210	100	156
„ „ 1886-90 .	1	14	10	80	66	9	1	15	184	67	202	68	216	100	175
„ „ 1881-85 .	0.2	13	15	36	67	1	6	13	204	74	185	69	251	82	159
„ „ 1876-80 .	1	35	30	28	66	2	19	29	223	101	194	61	286	72	146
„ „ 1871-75 .	48	68	30	53	68	5	20	35	243	107	214	56	281	60	136
„ „ 1866-70 .	4	71	35	50	62	8	62	49	298	130	259	59	238	70	122
„ „ 1861-65 .	36	93	49	51	62	12	176		274	128	280	57	220	59	122
„ „ 1856-60 .	40	118	54	70	69	12	109		322	179	203	56	182	58	111

*Corrected for transferred deaths in 1904 and subsequent years.

†Causes of Death classified in accordance with Sixth Revision of International List of Causes of Death.

TABLE III.—ABERDEEN.—MORTALITY AT VARIOUS AGE PERIODS FROM VARIOUS CAUSES.
(Corrected for transferred deaths.)

AGE.	A.—NUMBER OF DEATHS—YEAR 1950.																		B.—DEATH-RATE PER 100,000.										
	All Causes.		Infectious and Parasitic Diseases (excl. Tuberculosis).		Tuberculous Diseases.		Malignant Diseases.				Dis. of Nervous Syst. and Sense Organs.		Dis. of Circulatory System.		Respiratory Diseases.			Dis. of Digest. System (incl. Diarrhoea and Enteritis).		Dis. of Genito-Urinary System.		Dis. of Pregnancy and Child-birth.		Puerperal Sepsis.	Other Diseases.	Malformations under 1 year and Diseases of Early Infancy.	Senility.	Violence.	Miscellaneous.
Principal Epidemic.	Other Infections.	Respiratory.	Other Tuberculous.	Cereb. Hæm., etc.	Other Nervous.	Dis. of Circulatory System.	Pneumonia.	Bronchitis.	Other Respiratory.	Dis. of Digest. System (incl. Diarrhoea and Enteritis).	Dis. of Genito-Urinary System.	Puerperal Sepsis.	Other Diseases.	Malformations under 1 year and Diseases of Early Infancy.	Senility.	Violence.	Miscellaneous.												
Under 1 year.	92	1	3	—	—	—	1	—	15	1	—	2	1	—	60	—	5	3											
1-5 years	19	2	—	—	—	—	—	—	1	—	—	—	—	—	—	—	9	3											
5-15 "	15	—	—	—	—	—	2	2	2	—	—	1	—	—	—	—	5	1											
15-25 "	29	—	1	3	—	4	2	6	2	—	—	—	—	—	—	—	7	1											
25-35 "	33	—	—	7	1	5	1	5	2	—	—	—	—	—	—	—	5	4											
35-45 "	85	1	1	9	1	26	4	16	1	1	1	5	3	—	—	—	8	6											
45-55 "	192	—	3	7	1	62	14	52	2	8	3	10	4	—	—	—	10	11											
55-65 "	347	—	2	6	—	97	38	114	12	14	1	22	5	—	—	—	9	22											
65-75 "	607	5	3	3	—	116	110	243	27	12	2	19	21	—	—	—	11	27											
75+ "	847	7	—	3	—	80	144	377	42	49	5	24	26	—	—	13	36	30											
All Ages	2266	16	13	38	5	392	313	815	106	85	15	83	60	—	1	60	105	108											
1950	1208	9	7	20	3	208	167	434	56	45	8	44	32	—	1	32	7	57											



